

ONSCREEN TEXT AS AT 12_44 CET ON 27 MARCH 2024



**World Health
Organization**

**NINTH MEETING OF THE INTERGOVERNMENTAL
NEGOTIATING BODY TO DRAFT AND NEGOTIATE
A WHO CONVENTION, AGREEMENT OR OTHER
INTERNATIONAL INSTRUMENT ON PANDEMIC
PREVENTION, PREPAREDNESS AND RESPONSE
Provisional agenda item 2**

**A/INB/9/3
13 March 2024**

Revised draft of the negotiating text of the WHO Pandemic Agreement

***ONSCREEN TEXT AS AT 12_44 CET ON WEDNESDAY 27 MARCH
2024***

The Parties to the WHO Pandemic Agreement,

[Recognizing that the State Parties are fundamental to strengthening PPR (CHN)]

Bureau's proposal

Recognizing that State Parties bear the primary responsibility for supporting the health and well-being of their peoples, and that they are fundamental to strengthening pandemic prevention, preparedness and response,

1. *Recognizing* that the World Health Organization is fundamental to strengthening pandemic prevention, preparedness and response, as it is the directing and coordinating authority on international health work,

1. *Recognizing* that the World Health Organization [is (DEL MEX)] [plays a key leadership role in (MEX)] [at the centre of international (CHN) (DEL MEX)] [fundamental to strengthening (DEL CHN)] pandemic prevention, preparedness and response, as [its function is to act as [it is (DEL JPN)]] the directing and coordinating authority on international health work,

[Governments have a responsibility for the health of their peoples . . . (NOR)]

[NOTE: BRA Reference WHA73.1]

Bureau's proposal

Recognizing that the World Health Organization is the directing and coordinating authority on international health work, including on pandemic prevention, preparedness and response as,

2. *Recalling* the Constitution of the World Health Organization, which states that the enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition,

3. *Recognizing* that the international spread of disease is a global threat with serious consequences for lives, livelihoods, societies and economies that calls for the widest possible international cooperation in an effective, coordinated, appropriate and comprehensive international response, while reaffirming the principle of sovereignty of States in addressing public health matters,

3. *Recognizing* that the international spread of disease is a global threat with serious consequences for lives, livelihoods, societies and economies that calls for [global solidarity and (CHN, BRA, BGD, IND, SYR, MYS, RUS, PHL, TZA, TUN, MAR, PAK, ESW, PSE, IRN) (DEL USA, NZL)] the widest possible international cooperation in an effective, coordinated, appropriate[, equitable (KEN, ESW, BRA, PSE, SYR, BTN, BGD, ZMB)] and comprehensive international response, while reaffirming the principle of sovereignty of States in addressing public health matters,

Bureau's proposal

Recognizing that the international spread of disease is a global threat with serious consequences for lives, livelihoods, societies and economies that calls for the widest possible international and regional collaboration, cooperation and solidarity with all people and countries, in order to ensure an effective, coordinated, appropriate, comprehensive and equitable international response, while reaffirming the principle of sovereignty of States in addressing public health matters,

4. *Deeply* concerned by the gross inequities at national and international levels that hindered timely and equitable access to medical and other coronavirus disease (COVID-19) pandemic-related products, and the serious shortcomings in pandemic preparedness,

4. *Deeply* concerned [that the impact of the COVID-19 pandemic has further exacerbated the stark inequities . . . (UK) (~~DEL RUS~~)] by the [gross inequities (~~DEL CAN, UK, JPN~~) (~~RETAIN PAK, BGD, PSE, KEN, CHN, SYR, FJI, ZAF, NAM, MYS, MEX, BOT, EGY, RUS, IND, BRA, IDN, GMB, AF GROUP + EGY, COL, MAR~~)] [barriers (CAN, UK, JPN, RUS) (~~DEL EGY~~)] [and supply chain bottlenecks (IND)] [at national and international levels (~~DEL JPN~~)] that [hindered (~~DEL CAN, UK, JPN~~) (~~RETAIN PAK, NAM, IRN, KEN, CHN, SYR, FJI, PSE, ZAF, MYS, BOT, EGY, BGD, RUS, IND, BRA, IDN, GMB, AF GROUP + EGY~~)] [led to delays in (CAN, JPN, RUS) (~~DEL EGY~~)] timely and equitable access to [medical and other coronavirus disease (COVID-19) (~~DEL CHN, BGD, PAK, KEN, SYR, MYS, MEX, BOT, EGY, PSE, BRA, GMB~~)] pandemic-related products, and the serious shortcomings in pandemic [prevention, (EU, BGD, BRA, CAN, UK, JPN, CHN, SYR, FJI, MYS, BOT, EGY, IDN, GMB, AF GROUP + EGY, PAK, GTM)] preparedness[, response [and recovery (~~DEL EU, CAN, UK, JPN~~) (~~RETAIN BRA, BTN, PHL, TZA, PSE, JAM, IRN, SYR, ZAF, MYS, BOT, EGY, THA, NAM, URY, RUS, BRA, IDN, GMB, AF GROUP + EGY, PSE, GTM, COL, URY~~)] (IND, BGD, BRA, CAN, BTN, UK, IRN, JPN, JAM, IRN, CHN, SYR, FJI, MYS, BOT, EGY, AF GROUP + EGY, GTM, PSE, COL, URY)],

Bureau's proposal

Deeply concerned by the inequities at national and international levels that hindered timely and equitable access to coronavirus disease (COVID-19) pandemic-related products, and the serious shortcomings in pandemic prevention, preparedness and response,

5. *Recognizing* the critical role of whole-of-government and whole-of-society approaches at country and community levels, and the importance of international, regional and cross-regional collaboration, coordination and global solidarity in achieving sustainable improvements in pandemic prevention, preparedness and response,

5. *Recognizing* the critical role of whole-of-government and whole-of-society approaches at [country (~~DEL KEN~~)] [national (KEN, AF GROUP + EGY)] and community levels, [including through the promotion of broad social participation, (BRA, TUN)] and the importance of international, regional [and cross-regional (~~DEL CHN, AF GROUP + EGY~~)] collaboration, coordination [, cooperation (AF GROUP + EGY)] [and global solidarity (~~DEL USA~~) (~~RETAIN BRA, CHN, PSE, KEN, AF GROUP + EGY~~)] in achieving sustainable

improvements in pandemic prevention, preparedness and response [and recovery (IND, CHL, KEN)],

[5bis Recognizing the value and the diversity of the cultures and knowledge of Indigenous Peoples and local communities, and efforts of Member States to evaluate through an evidence-based approach, the potential of traditional medicine, including its contribution to health systems in pandemic prevention, preparedness and response. (BOL)]

Bureau's proposal

Recognizing the critical role of whole-of-government and whole-of-society approaches at national and community levels, through broad social participation, in strengthening pandemic prevention, preparedness, response and health systems recovery,

6. *Recognizing* the importance of ensuring political commitment, resourcing and attention across sectors for pandemic prevention, preparedness and response,

6. *Recognizing* the importance of ensuring political commitment, [resourcing (~~DEL~~ CHN, KEN)] [, including (AF GROUP + EGY)] [resource mobilization (CHN, BGD, KEN)] [and allocation (IND, BGD)] [,] and [attention (~~DEL~~ CHN, BGD) (**RETAIN** KEN)] [and (KEN)] [action (CHN, BGD, KEN)] [through cross-sectoral collaborations (IND, BGD)] [across sectors (~~DEL~~ IND, BGD)] [, including from private sector and other stakeholders (NGA)] for pandemic prevention, preparedness and response, [and recovery (CHL, AF GROUP + EGY)]

Bureau's proposal

Recognizing the importance of ensuring political commitment, resourcing and action through cross-sector collaborations for pandemic prevention, preparedness, response and health systems recovery,

7. *Reaffirming* the importance of multisectoral collaboration at national, regional and international levels to safeguard human health, including through a One Health approach,

7. *Reaffirming* the importance of multisectoral collaboration at national, regional and international levels to safeguard human health, including through [a (~~DEL~~ EU)] [the (EU)] One Health approach,

Bureau's proposal

Reaffirming the importance of multisectoral collaboration at national, regional and international levels to safeguard human health, including through a One Health approach,

Bureau's proposal

Recognizing the importance of rapid and unimpeded access of humanitarian relief in accordance with international law, including international human rights law and international humanitarian law, and the respect of principles of humanity, neutrality, impartiality and independence for the provision of humanitarian assistance,

8. *Reiterating* the need to work towards building and strengthening resilient health systems, with skilled and trained health and care workers, to advance universal health coverage and to adopt an equitable approach to mitigate the risk that pandemics exacerbate existing inequities in access to health services,

8. *Reiterating* the need to work towards building and strengthening resilient health systems, with [adequate (PHL, IND, PSE, AF GROUP + EGY, RUS, IDN, FJI, BGD, USA, MEX, SYR, ZAF, UK, MYS, DOM, THA)] [numbers of (FJI, USA, MEX, DOM, THA)] skilled and trained[, [well- (NGA)] compensated and protected (BRA, IDN, BGD, MEX, ZAF, NGA) (**RESERVE** USA)] health and care workers, [and [including by (JPN, USA, UK)] using a primary health care approach (UK, IDN, JPN, USA, MEX, ZAF, MYS, PAK, DOM, NGA)] [providing quality, people-centred care (CHN, PSE, AF GROUP + EGY, IDN, JPN, BGD, MEX, SYR, ZAF, MYS, IRN, PAK, DOM, THA, NGA) (**DEL** USA)] [NOTE: MOVE UP (MEX, NOR, DOM)] to [advance (**DEL** IND, AF GROUP + EGY) (**RETAIN** USA)] [the [attainment (**DEL** FJI, JPN, BGD, MYS, AUS, DOM) [achievement (FJI, JPN, BGD, USA, MEX, MYS, AUS, PAK, DOM)] of (IND, AF GROUP + EGY, MYS)] universal health coverage and to adopt an equitable approach to mitigate the risk that pandemics exacerbate existing inequities in access to health [care (EGY)] [services (**DEL** IND, RUS, SYR, EGY, IRN, PAK) (**RETAIN** CAN, USA, UK, AUS, NOR)] [care (IND, RUS, SYR, EGY, IRN, PAK) (**DEL** CAN, USA, UK, AUS, NOR)],

[8bis. Recognizing the importance of building trust and ensuring timely sharing of information to prevent misinformation, disinformation and stigmatization which undermine global solidarity, prompt discrimination, isolation, and negatively affect those infected, as well as their caregivers, families, friends and communities, (CHN)]

Bureau's proposal

Reiterating the need to work towards building and strengthening resilient health systems, with adequate numbers of skilled, trained and protected health and care workers, to advance achievement of universal health coverage, particularly through a primary healthcare approach, and to adopt an equitable approach to mitigate the risk that pandemics exacerbate existing inequities in access to health care services,

9. *Recognizing* that the protection of intellectual property rights is important for the development of new medical products, and recalling that intellectual property rights do not, and should not, prevent Member States from taking measures to protect public health, and further recognizing concerns about the effects of intellectual property rights on prices,

9. [*Recognizing* that [intellectual property protection] [the protection of intellectual property rights (**DEL JPN**)] [in accordance with international rules (EU)] is important for the development of new medic[al products (**DEL JPN**) (**RETAIN DOM**)] [ines (JPN) (**DEL DOM**)] [but it is inadequate for the development of new products to fight diseases where the potential paying market is small or uncertain (BGD)], and recalling that intellectual property rights [do not, and (**DEL KEN, AF GROUP + EGY, ESW**)] should not, prevent Member States from taking measures to protect public health, and further recognizing concerns about the effects of intellectual property rights on prices, (**DEL COL, USA, BRA, CHE, ROK**) (**RETAIN CHN, KEN, IND, ESW, FJI, SYR, AF GROUP + EGY**)] [and the timely availability of new medical products, especially in developing countries (BGD, FJI, SYR, BRA, CHN, MYS, NGA, DOM)]

[*9alt. Recognizing* that intellectual property should not prevent Member States' right of taking measures to protect public health in particular to promote access to medical products for all, (COL, BRA, FJI, MYS) (**RESERVE USA, UK, JPN, EU, AUS, CAN, AF GROUP + EGY, ESW, ROK, CHE, SGP, BGD, TUR, BRN**)]

[*9bis. Acknowledging further* that special provision is required to meet the needs of developing countries, including the provision of the new and additional financial resources and appropriate access to relevant technologies, (COL, BRA, FJI, MYS) (**RESERVE USA, UK, JPN, EU, AUS, CAN, AF GROUP + EGY, ESW, ROK, SGP, BGD, BRN**)]

Bureau's proposal

Recognizing that intellectual property protection is important for the development of new medicines, and recognizing the concerns about its effects on prices, and recalling that the TRIPS Agreement does not, and should not, prevent Member States from taking measures to protect public health,

10. *Recognizing* Member States' sovereign rights over their genetic resources and underscoring the importance of promoting the early, safe, transparent and rapid sharing of samples and genetic sequence data of pathogens with pandemic potential, as well as the fair and equitable sharing of benefits arising therefrom, taking into account relevant national and international laws, regulations, obligations and frameworks,

10. [*Recognizing* Member States' sovereign rights [as well as the rights of their communities/societies (BGD) (**DEL RUS**)] over their [biological [materials (**DEL BRA, IND, IDN**)] [resources (BRA, IND, IDN)] and their (CHN, KEN, BGD, IDN, AF GROUP + EGY, COL, IRN)] genetic resources and (**DEL USA, JPN, EU**) (**RETAIN KEN, BGD, BRA, IND, NAM, IDN, IRN, RUS**)] [Reaffirming the sovereign rights of States over their natural resources and according to the provisions of the Convention on Biological Diversity (EU)]

(DEL RUS)] underscoring the importance of promoting the [early, (DEL CHN, KEN, IDN, AF GROUP + EGY)] [timely, (CHN, KEN, IDN, AF GROUP + EGY, IRN)] safe, transparent and rapid sharing of samples and genetic sequence data of pathogens with pandemic potential, [for public health purposes (JPN)] [in a traceable and accountable manner (IND, BGD, COL, IDN, AF GROUP + EGY) (DEL USA, UK)] as well as the fair and equitable[, early, transparent and rapid (BGD, NGA)] sharing of benefits arising therefrom, taking into account relevant national and international laws[, regulations, obligations and frameworks, (DEL RUS)]

Bureau's proposal

Recognizing Member States' sovereign rights over their biological resources and underscoring the importance of promoting, on an equal footing, the timely, safe, transparent, accountable and rapid sharing of samples and genetic sequence data of pathogens with pandemic potential for public health purposes, as well as the timely, fair and equitable sharing of benefits arising therefrom, taking into account relevant national and international laws,

11. *Acknowledging* that unequal development in different countries in the promotion of health and control of disease, especially communicable disease, is a common danger that requires support through international collaboration, and that pandemic prevention, preparedness and response at all levels and in all sectors, particularly in developing countries, requires predictable, sustainable and sufficient financial, human, logistic and technical resources,

11. *Acknowledging* that unequal [economic status and (NGA)] development in different countries [adversely impacts (IND)] [in (DEL IND)] the promotion of health and control of disease, especially communicable disease, [and (IND)] is a common danger that requires support through international collaboration, and that pandemic prevention, preparedness and response [and recovery (IND, NGA, PHL)] at all levels and in all sectors, [particularly in developing countries, (DEL EU, USA) (RETAIN EGY)] [and countries under unilateral coercive measures (SYR, CHN, ZAF, EGY, PSE, NIC, CUB, BEL, RUS, BRA, IRN, BOL, VEN) (DEL UK, CAN, AUS, USA, NOR, EU, CHE, JPN, CHE)] [and in armed conflict and other humanitarian emergencies, (PSE)] requires predictable[, (DEL USA) (RETAIN (NGA))] [and (USA)] sustainable [and sufficient (DEL USA) (RETAIN FJI, COL, NGA, PAK)] financial, human, logistic and technical resources, [including in developing countries and with particular attention to the needs of the least developed countries [with particular attention to the special vulnerabilities and needs of small island developing States (DOM)] (EU) (DEL CHN, IRN, NMB, EGY, KEN, ZAF, COL, NGA, SYR, NIC)],

[NOTE: Retain original text with IND proposals (ESW)]

[11Alt. Acknowledging that unequal development in different countries in the promotion of health and control of disease, especially communicable disease, is a common danger that requires support through international collaboration, and that pandemic prevention, preparedness and response at all levels and in all sectors, particularly in developing countries, requires predictable. sustainable and sufficient financial, human, logistic and technical resources, and concerned that unilateral coercive measures, inter alia in the form of economic sanctions, and secondary sanctions have far-reaching implications for countries health

systems, disproportionately affect developing countries and undermine global pandemic prevention, preparedness, response and recovery (SYR)].

Bureau's proposal

Recognizing that differences in the levels of development of Parties engender different capacities and capabilities in pandemic prevention, preparedness and response and acknowledging that unequal development in different countries in the promotion of health and control of disease, especially communicable disease, is a common danger that requires support through international cooperation, including the support of countries with greater capacities and resources, as well as predictable, sustainable and sufficient financial, human, logistical and technical resources,

[12. *Reiterating* the determination to achieve health equity through resolute action on social, environmental, cultural, political and economic determinants of health, such as eradicating hunger and poverty, ensuring access to health and proper food, safe drinking water and sanitation, employment and decent work and social protection in a comprehensive intersectoral approach, (BRA)]

[13. *Recognizing* the need to ensure policy responses that are coherent, sustainable and respectful of human dignity to shape a safe and equitable recovery and reestablishment of the capabilities of the health systems, especially essential public health functions, focusing on the most vulnerable populations, (BRA)]

[14. *Stressing* that adequate prevention, preparedness, response and recovery to pandemics should be understood as a continuum connected to the general international effort to combat other health emergencies, and that initiatives and mechanisms should be coherent and take this dynamic into consideration, (BRA, COL)]

[15. *Recognizing* the importance and public health impact of growing threats such as climate change and the spread of antimicrobial resistance, (FJI, COL, SAM, URY, DOM, PHL, BGD)]

Bureau's proposal

Stressing that adequate pandemic prevention, preparedness, response and health systems recovery is part of a continuum to combat other health emergencies and achieve greater health equity through resolute action on social, environmental, cultural, political and economic determinants of health,

Recognizing the importance and public health impact of growing threats such as climate change, poverty and hunger, fragile and vulnerable settings, weak primary health care, and the spread of antimicrobial resistance,

Have agreed as follows:

Chapter I. Introduction

Article 1. Use of terms

For the purposes of the WHO Pandemic Agreement:

For the purposes of the WHO Pandemic Agreement:

[NOTE: Consider adding authorized national laboratory (AF GROUP + EGY)

[Laboratories authorized . . . to provide PABS materials to the PABS system and recognized as part of the WHO laboratory network (AF GROUP + EGY)]

(a) “biological materials” means clinical samples, specimens, isolates and cultures, either original or processed, of a pathogen;

(a) “[pandemic-related (RUS, SYR)] [PABS (AF GROUP + EGY, QAT, MYS, BGD)] biological materials” means clinical samples, specimens, isolates and cultures, either original or processed, [of (~~USA~~)] [that are likely to contain (USA)] a pathogen [with pandemic potential (RUS, SYR)] [PHEIC and pandemic potential (AF GROUP + EGY, SYR, QAT, MYS, BGD)];

RESERVE SUBPARA (a) (CHE, UK, CAN)

[(a)*bis* “digital sequence information” (DSI) includes all data, metadata or information derived from genetic resources. This definition is operational and may be revised by the Conference of the Parties of this instrument, in light of discussions being held in other fora. (BRA, BGD)]

(b) “genetic sequence” means the order of nucleotides identified in a molecule of DNA or RNA, and contains the genetic information that determines the biological characteristics of an organism or a virus;

[(b) “genetic sequence” means the order of nucleotides [identified (~~BGD~~)] in a molecule of DNA or RNA[, and contains the genetic information that determines the biological characteristics (~~BGD~~)] of an organism or a virus; (~~(b) BRA~~)]

RESERVE SUBPARA (b) (CHE, UK, CAN)

(c) “genetic sequence data” means the order of nucleotides found in a molecule of DNA or RNA;¹

[(c) “genetic sequence data” means [data of (JPN)] the order of nucleotides [found (DEL BGD)] [identified (BGD)] in a molecule of DNA or RNA [which may contain its quality metrics (JPN)] [that contains genetic information that determines and contributes to the biological characteristics and biochemical functions, and any data associated with the order of nucleotides identified that explain and contribute to the understanding of the biological characteristics and biological functions, including the pathogenicity of an organism or a virus (BGD)];¹

RESERVE SUBPARA (c) (CHE, UK, CAN)

Footnote 1: Definition might need to be adjusted following finalization of the negotiation within CBD on the scope of Digital Sequence Information, DSI, that, in addition to DNA and RNA, might include proteins and metabolites.

(DEL (c) BRA, USA)]

[(c)*bis*. “health and care workers” are all those workers classified as such by the International Standard Classification of Occupations; (ISCO) (BRA)]

[**NOTE:** Consider adding “healthcare workforce”]

(d) “manufacturer” means any entity that produces, for commercial purposes, including by means of licensing agreements, diagnostics, therapeutics or vaccines for infectious diseases;

[(d) “[relevant (AF GROUP + EGY)] manufacturer [or entities (AF GROUP + EGY)]” means any entity that produces [and sells (USA)], for commercial purposes, including by means of licensing agreements, diagnostics, therapeutics or vaccines for infectious diseases; **RESERVE (CHE)**]

RESERVE SUBPARA (d) (CHE, UK, CAN)

[(d)*alt* “relevant manufacturer” means public or private entities, including academic institutions, government-owned or government-subsidized entities, non-profit organizations, commercial entities, biotechnology firms and research institutions that

¹ Definition might need to be adjusted following finalization of the negotiation within CBD on the scope of Digital Sequence Information, DSI, that, in addition to DNA and RNA, might include proteins and metabolites.

develop or produce health products such as vaccines, diagnostics and therapeutics (AF GROUP + EGY)]

(e) “One Health approach” means an integrated, unifying approach that aims to sustainably balance and optimize the health of people, animals and ecosystems. It recognizes that the health of humans, domestic and wild animals, plants and the wider environment (including ecosystems) is closely linked and interdependent;

[(e) “One Health approach” means an integrated, unifying approach that aims to sustainably balance and optimize the health of people, animals and ecosystems. It recognizes that the health of humans, domestic and wild animals, plants and the wider environment (including ecosystems) [is (**DEL MCO**)] [are (MCO)] closely linked and interdependent[. The approach mobilizes multiple sectors, disciplines and communities at varying levels of society to work together on shared health challenges including pandemic prevention, preparedness and response. (UK, CAN)] [while identifying and addressing the factors underlying disease emergence, spread and persistence and the complex economic, social and environmental determinants of health (BRA, URY, MEX, TUN, DOM, BGD, BOL, MYS)];

(**DEL SUBPARA (e) USA**) (**RETAIN SUBPARA (e) IRN, COL, AUS, MEX, DOM, UGA, SYR, NOR, MCO, CRI, CHN**)]

RETAIN definition of One Health (UAE, AF GROUP + EGY, QAT)

(f) “PABS sequence databases” means publicly accessible databases that meet and agree to legally binding terms of reference that include arrangements to notify users of benefit-sharing provisions under the PABS system;

[(f) “PABS sequence databases” means publicly accessible databases that meet and agree to legally binding terms of reference that include arrangements to notify users of benefit-sharing provisions under the PABS system;

RESERVE SUBPARA (f) (USA, CAN, CHE, UK, RUS)]

(g) “pandemic-related products” means products that are needed for pandemic prevention, preparedness and response, which may include, without limitation, diagnostics, therapeutics, vaccines and personal protective equipment;

(g) “pandemic-related [health (USA, EU, UAE, UK, CAN, ROK, ISR)] products” means products that are needed [during pandemic emergencies (NZL, AUS, UGA, BRN) (**DEL PAK, COL, BRA, BGD**)] for pandemic prevention, preparedness and response, [which may include [, without limitation, (**DEL USA, CAN, UK, CHE**)]

(DEL CHN, SYR)] [including (CHN, SYR)] diagnostics, therapeutics, vaccines and personal protective equipment;

RESERVE SUBPARA (g) (AUS)

(h) “Party” means a State or regional economic integration organization that has consented to be bound by this Agreement, in accordance with its terms, and for which this Agreement is in force;

(h) “Party” means a State or regional economic integration organization that has consented to be bound by this Agreement, in accordance with its terms, and for which this Agreement is in force;

(i) “pathogen with pandemic potential” means any pathogen that has been identified to infect a human and that is: novel (not yet characterized) or known (including a variant of a known pathogen), potentially highly transmissible and/or highly virulent with the potential to cause a public health emergency of international concern;

(i) “pathogen with pandemic potential” means any pathogen that has been identified to infect [a human (DEL CHN)] [humans (CHN)] and that is: novel (not yet characterized) or known (including [a variant of a known pathogen), potentially highly transmissible and/or highly virulent with the potential to cause [a public health emergency of international concern (DEL JPN)] [a pandemic emergency (JPN)] (DEL USA)] [existing pathogens with a change in disease severity, mode of transmission or evasion from an existing medical countermeasure), and likely to be both highly transmissible with the potential for uncontrolled spread and sufficiently virulent that it has the potential to cause a [public health emergency of international concern (DEL CHN)] [a pandemic (CHN)] or pandemic emergency (USA)];

RESERVE SUBPARA (i) (CHE, UK, CAN)

(j) “persons in vulnerable situations” means individuals, groups or communities with a disproportionate increased risk of infection, severity, disease or mortality in the context of a pandemic;

(j) “[persons (DEL CHN)] [people (CHN)] [who may be (AUS, CRI, TUN, URY)] in vulnerable situations” means individuals, [as well as persons belong to (EU, BRA, UK, CRI, URY, CAN)] groups or communities with a disproportionate increased risk of [being excluded from the enjoyment of the right to health, including (BGD, SYR)] infection, severity, [disease (DEL RUS)] or mortality in the context of a pandemic [and humanitarian emergency settings (PSE, SYR)] [emergency, [including vulnerability due to discrimination of any kind (AUS, EU, CRI)] or due to exposure to humanitarian,

fragile or conflict situations [including vulnerability related to social, environmental and economic determinants of health (CAN, BRN)] [or due to belonging to an ethnic group (BRA, CRI)] (EU, BRA, AUS, MCO)];

[**RETAIN** Bureau text: RUS, PAK, CHN, EGY]

(k) “regional economic integration organization” means an organization that is composed of several sovereign states and to which its Member States have transferred competence over a range of matters, including the authority to make decisions binding on its Member States in respect of those matters;¹

(k) “regional economic integration organization” means an organization that is composed of several sovereign states and to which its Member States have transferred competence over a range of matters, including the authority to make decisions binding on its Member States in respect of those matters;²

Footnote 2: Where appropriate, “national” will refer equally to regional economic integration organizations.

(l) “relevant diagnostic, therapeutic or vaccine” means a diagnostic, therapeutic or vaccine that is prequalified by WHO or has received a positive WHO Emergency Use Listing assessment or an authorization from a national regulatory authority for treatment, diagnosis or prevention of a disease in relation to which WHO has declared a public health emergency of international concern or characterized as a pandemic;

(l) “relevant diagnostic, therapeutic or vaccine” means a diagnostic, therapeutic or vaccine that is [approved (RUS)] [prequalified (**DEL** RUS)] by WHO or has received [a positive WHO Emergency Use Listing assessment (**DEL** RUS)] [or an authorization from a national [and regional (EU)] regulatory authority (**DEL** USA)] [or authorization by a WHO-listed authority (USA)] for treatment, diagnosis or prevention of a disease in relation to which WHO has declared a public health emergency of international concern or characterized as a pandemic;

RESERVE SUBPARA (l) (CHE, UK, CAN, AUS)

[**NOTE:** Consider adding term “relevant organizations”]

[**NOTE:** Consider adding term “stakeholders”]

¹ Where appropriate, “national” will refer equally to regional economic integration organizations.

(m) “universal health coverage” means that all people have access to the full range of quality health services they need, when and where they need them, without financial hardship. It covers the full continuum of essential health services, from health promotion to prevention, treatment, rehabilitation and palliative care; and

(m) “universal health coverage” means that all people have access to the full range of quality health services they need, when and where they need them [at all times and in all circumstances (PSE)], without financial hardship. It covers the full continuum of essential health services, from health promotion to prevention, treatment, rehabilitation and palliative care [essential, safe, affordable, effective and quality health products with a special emphasis on the poor, vulnerable and marginalized segments of the population (BRA, CHL, URY, DOM)]; and

[(m)*alt* “universal health coverage” means that all people have access, without discrimination, to nationally determined sets of needed promotive, preventive, curative, rehabilitative and palliative essential health services, and essential, safe, affordable, effective and quality medicines and vaccines while ensuring that the use of these services does not expose the users to financial hardship, with a special emphasis on the poor, vulnerable and marginalized segments of the population (MEX, CRI, BRA, NOR, DOM, JPN, BRN, PAK, COL, UK)]

NOTE: Support UHC definition as drafted by Bureau (JPN, PAK)

(n) “WHO-coordinated laboratory network” means laboratory alliances or networks coordinated by WHO in which each laboratory meets WHO standards and agrees to legally binding terms of reference that include arrangements to notify users of biological materials for pathogens with pandemic potential of benefit sharing provisions under the PABS system.

(n) “WHO-coordinated laboratory network” means laboratory alliances or networks coordinated by WHO in which each laboratory meets WHO standards and agrees to [legally binding (~~USA~~)] terms of reference that include arrangements to notify users of biological materials for pathogens with pandemic potential of benefit sharing provisions under the PABS system.

RESERVE SUBPARA (n) (CHE, UK, CAN, RUS)

[(n)*alt*. “WHO-coordinated laboratory network” means laboratories coordinated by WHO in which each laboratory meets criteria and standards established under the PABS system and have signed legally binding contracts with WHO and have agreed to uphold the PABS system and conditions (AF GROUP + EGY)]

[**RESERVE** on definitions in subparas: a, b, c, d, f, i, n (EU, AUS)]

[**RESERVE** on definitions in subparas:a, b, c, d, f, i, l, n (UK)]

[**RESERVE** on definitions in subparas: f, g, l, n (JPN)]

[**RESERVE** on definitions in subparas: b, c, g, f, m, n (IND)]

Article 2. Objective

The objective of the WHO Pandemic Agreement, guided by equity, and the principles and approaches set forth herein, is to prevent, prepare for and respond to pandemics.

The objective of the WHO Pandemic Agreement, guided by equity, [the right to health (TUN, EGY, SYR)] and the [other (EU, BGD, USA)] principles [and approaches (~~DEL~~ CHN, EU, MYS, PAK, JPN, BGD, SYR), (**RETAIN** FJI, IND, USA)] set forth herein, is to [save lives and prevent suffering through strengthened pandemic PPR (FJI, CHL, PAK, NOR, SGP, BWA)] prevent, prepare for and respond to [and facilitate recovery from (IND, CHL, PAK, SYR)] pandemics [without unnecessary interference with people's daily life and livelihoods (BGD, PAK) (~~DEL~~ SGP)]

[Para 1 Alt. The objective of this agreement is the prevention, preparation and response to pandemics, which stands out for equity and is guided by the other principles and approaches established in this document (PER)].

[Para 2. In furtherance of its objectives, [articles of (NZL)] the WHO Pandemic Agreement [may apply (NZL)] [applies ~~DEL~~ NZL) both during and between pandemics, [unless the text specifies otherwise (~~DEL~~ NZL)] [in accordance with their terms (NZL) (COL, BGD, IND, CHL, PER, FJI, ARG, BRN, FJI, MYS, UK, SYR, SGP, IDN)].

[Retain original text: (ROK)]

Bureau's proposal

1. **The objective of the WHO Pandemic Agreement, guided by equity, and other principles set forth herein, is to prevent, prepare for and respond to pandemics.**
2. **In furtherance of this objective, the provisions of the WHO Pandemic Agreement apply both during and between pandemics, unless otherwise specified.**

Article 3. [Guiding (USA, CAN)] Principles [and approaches (USA, CAN)]

Retain original title: AF GROUP + EGY, BOL, CHN, MYS, SYR, NAM, DOM, IDN, RUS, NIC, ZAF, IND

To achieve the objective of the WHO Pandemic Agreement and to implement its provisions, the Parties [will (~~DEL~~ USA)] [shall (USA, NGA, CAN)] be guided, inter alia, by the following [principle (AF GROUP + EGY, NAM)]:

Bureau's proposal (moved from original #2)

1. the sovereign right of States to adopt, legislate and implement legislation, within their jurisdiction, in accordance with the Charter of the United Nations, the WHO Constitution and the principles of international law, and their sovereign rights over their biological resources;

1. 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;

1. full respect for the dignity [and protection of (ZAF, PSE)], human rights and fundamental freedoms of all persons, and the enjoyment of the highest attainable standard of health of every human being, [with each party promoting non-discrimination, respect for diversity, gender equality, and respect for persons in vulnerable situations (CAN, NOR, COL)];

[*Alt 1.* international human rights law, including fundamental freedoms, the enjoyment of the highest attainable standards of health of every human being, the full respect for the dignity of all persons, gender equality, as well as international humanitarian law and principles (EU, AUS, COL)]

Retain original: CHN, IND, PAK, EGY, AF GROUP + EGY, MYS, SYR, NGA, NAM, IDN, RUS, IRN, NIC, ZAF, IND, PSE, BGD, UAE

Bureau's proposal

2. 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;

2. the sovereign right of States to adopt, legislate and implement legislation, within their jurisdiction, in accordance with the Charter of the United Nations and the general principles of international law, and their sovereign rights over their biological resources;

2. the sovereign right of States to adopt, legislate and implement legislation, within their jurisdiction, in accordance with the Charter of the United Nations [WHO Constitution, (CHN, PSE, SYR, NGA, RUS, EGY, ZAF, NIC)] and the [general (DEL AUS)] principles of international law, [and the use of the biological and genetic resources (NAM, ZAF)] [and their sovereign rights over their [the use of their genetic materials and (AF GROUP + EGY, BOL, CHN, MYS, SYR, NAM, IDN, PHL, NIC, ZAF, COL, IND, BRA, PHL, NIC)] biological resources; (DEL USA, EU, JPN)]

NOTE: Change order of paragraphs 1 and 2 (CHN, MYS)

Bureau's proposal (new text)

3. full respect of international humanitarian law for effective pandemic prevention, preparedness and response;

3. equity as the goal and outcome of pandemic prevention, preparedness and response, ensuring the absence of unfair, avoidable or remediable differences among groups of people;

3. equity as [[the (DEL BRN)] [a (BRN)] goal and outcome (DEL EU)] [an integral component (EU)] of pandemic prevention, preparedness and response, [and recovery (AF GROUP + EGY, IND, PAK, MYS, CHL, NAM, IDN, PHL, ZAF)] [ensuring (DEL UK)] [striving for (UK)] the absence of unfair, avoidable or remediable differences [between countries and (BGD, CHN, PSE, MYS, SYR, IDN, IRN, ZAF, IND,

CAF)] among [individuals, (AUS, CAN)] groups of people; [, including due to gender inequality (EU) (DEL CHN, NGA, AF GROUP + EGY)] [, especially with regards to inequities [and barriers (RUS, IRN, NGA, PSE, SYR)] in [unhindered (IRN, NIC, PSE, NGA, SYR)] access to [medical countermeasures (DEL MYS, BGD) / Pandemic related products (MYS, ZAF, COL, BGD)] (BRA, IRN, BOL, URY, PSE, MYS, SYR, NGA, IDN, RUS, NIC, COL)] (DEL USA)]

Retain original text: DOM

Bureau's proposal

4. equity as a goal and outcome of pandemic prevention, preparedness and response, striving for the absence of unfair, avoidable or remediable differences among and between individuals, communities and countries;

4. common but differentiated responsibilities and respective capabilities in pandemic prevention, preparedness, response and recovery of health systems;

4. [common but differentiated responsibilities and respective capabilities [of developed and developing countries (BGD, CHN, PSE, SYR, NGA, NIC, ZAF, COL, NIC, VEN)] in pandemic prevention, preparedness, response and recovery of health systems; [(DEL USA, NOR, MCO, EU, NZL, UK, ISR, JPN, AUS, CHE, CAN, ROK)] (Retain original: PAK, IRN, EGY, AF GROUP + EGY, BOL, CHN, PSE, MYS, SYR, NGA, NAM, DOM, IDN, BRA, ZAF, IND, NIC)]

Alt 4. [the differentiated capabilities of parties in pandemic prevention, preparedness and response (EU, NZL, JPN, NOR)]

Alt 4 bis. [Recognizing that the implementation of this Agreement is dependent on the fullest cooperation of all Parties including the support of countries with greater capacities and resources in pandemic prevention, preparedness, and response in light of the different national circumstances and unequal global development (BRN)].

[NOTE: Reintroduce the principle of responsibility (as new para 4 as in previous text) (NOR)]

Bureau's proposal

5. [common but differentiated responsibilities and respective capabilities in pandemic prevention, preparedness, response and recovery of health systems;]

5. solidarity, transparency and accountability to achieve the common interest of a more equitable and better prepared world to prevent, respond to and recover from pandemics; and

5. solidarity [(DEL USA, NZL) (RETAIN BOL, CHN, SYR, NGA, DOM, RUS, BRA, AF GROUP + EGY, PHL, IRN, NIC, ZAF, COL, BGD, IND, PSE, CAF, KWT, GTM, VEN)] [inclusivity (EU, AUS, TUR, NGA, CAN, PSE)] transparency and [accountability (DEL RUS)] [cooperation (RUS)] to achieve the common interest of a more equitable and better prepared world to prevent, respond to and recover from pandemics; and

[NOTE: To replace 4 and 5. Para 4. solidarity, transparency and accountability, recognizing different levels of capacities, to achieve equity and the common interest of a better prepared world to prevent, respond to and recover from pandemics (MCO, AUS)]

Retain original paragraph: CHN, SYR, AF GROUP + EGY, NIC

Bureau's proposal

6. solidarity with all people and countries in the context of health emergencies, inclusivity, transparency and accountability to achieve the common interest of a more equitable and better prepared world to prevent, respond to and recover from pandemics, recognizing different levels of capacities and capabilities; and

6. the best available science and evidence as the basis for public health decisions for pandemic prevention, preparedness and response.

6. the best available science and evidence [, together with the principle of freedom of scientific research, (EU) (~~DEL~~ NGA, ZAF, CAF)] [leveraging digital health (IND, BGD) (~~DEL~~ NGA)] [, and equity (BGD, MYS, NGA, IDN, PSE, CAF, SYR)] as the basis for public health decisions for pandemic prevention, preparedness [and (~~DEL~~ IND)] response [and recovery (IND, NGA, CHL, EGY, PHL, ZAF) (~~DEL~~ AUS)].

[6bis. a One Health approach with the goal of achieving optimal health outcomes, recognising the interconnection between people, animals, plants and the environment (USA, MCO, EU, NZL, AUS, TUR, CHE, CAN, NOR, COL, NOR) (~~DEL~~ PAK, IRN, AF GROUP + EGY, CHN, URY, MYS, SYR, NAM, IDN, NIC, ZAF, BGD, URY, NIC)].

7. Full respect for obligations under international [law, including international human rights law and international (ISR)] humanitarian law, which is essential to effective pandemic prevention, preparedness and response (MCO, PSE, MYS, CHE, IDN) (~~DEL~~ IND)]

[RETAIN original paragraph 6: CHN, SYR, RUS, IND, NIC]

[ADD: Text - implementation of this Agreement shall respect the right to privacy, including as such rights is established under international law, and shall be consistent with each parties' national laws and international obligations regarding confidentiality, privacy and data protection, as applicable (CHE, TUR, UAE)]

Bureau's proposal

7. the best available science and evidence as the basis for public health decisions for pandemic prevention, preparedness and response.

[RETAIN all original article 4: FJI, CHL]

Chapter II. The world together equitably: achieving equity in, for and through pandemic prevention, preparedness and response

Article 4. Pandemic prevention and surveillance

1. The Parties commit to take measures to progressively strengthen pandemic prevention and coordinated multisectoral surveillance, taking into account national capacities and national and regional circumstances.

1. The Parties [commit to (~~DEL UK, AUS, USA, CAN, NOR~~) (**RETAIN PAK, BRA, PSE, UAE, RUS, SYR)] [resolve to (USA)] [shall (UK, AUS, CAN, NOR) (~~DEL PAK, BRA, QAT, UAE, PAK~~)] [develop, implement and periodically review policies, strategies and (EU) (~~DEL RUS~~)] [take (~~DEL EU~~)] measures [in line with the One Health Approach (EU, AUS, TUR, NOR) (~~DEL RUS, NGA, IRN~~)] to progressively strengthen pandemic prevention and [coordinated multisectoral (~~DEL RUS~~) (**RETAIN USA**)] surveillance [capacities in accordance with IHR (RUS, NGA, IRN)], taking into account national capacities [and national and regional circumstances [as well as obligations under the IHR (EU, CHE)] (~~DEL BGD, CAF~~)] [and resources available at its disposal (BGD)].**

[NOTE Retain original text: BRA, COL, QAT, CHN, UAE, IND, FJI, MYS]

2. The Parties shall undertake to cooperate:

2. The Parties [shall (~~DEL BGD~~) (**RETAIN USA**)] [undertake to (~~DEL EU, PAK, COL, CAN, NOR~~) (**RETAIN BGD, USA**)] cooperate [where appropriate (JPN)]:

NOTE: Retain chapeau as it is (RUS)

(a) in the implementation of the provisions of this Article, in particular through enhancing financial and technical support to developing countries; and

(a) [in the implementation of the provisions of this Article, in particular through [technical assistance and capacity building taking into account especially the needs of the least developed country parties and other parties in need (EU) (~~DEL COL, NGA, TZA~~)] [enhancing financial and technical support [and transfer of technology (BRA)] [including technological transfer (AF GROUP + EGY, TUN, COL, PSE, MYS)] to [developing countries (RETAIN NGA, NPL)] [LDCs (NPL)] [in line with Articles 16, 19 and 20 (AUS, NOR)]; (~~DEL EU~~) (**RETAIN TZA**)] and (~~DEL 2(a)~~) (USA, ISR) (**RETAIN TZA**)]

NOTE: Retain as it is (FJI)

(b) in support of relevant global and/or regional initiatives aimed at preventing pandemics, in particular those that improve surveillance, early warning and risk assessment; promote evidence-

based actions, risk communication and community engagement; and identify settings and activities presenting a risk of emergence and re-emergence of pathogens with pandemic potential.

(b) in support of relevant [regional and (AF GROUP + EGY, CAF, MYS)] [global [and/or (DEL EU)] regional (DEL AF GROUP + EGY, COL, CAF) [and national (EU)]] [intergovernmental (CAF)] initiatives (DEL RUS)] [agreed measures (RUS)] aimed at preventing pandemics, in particular [those (DEL MEX, BRA, COL, CAF)] [for capacity building (MEX, BRA, COL, PSE, CAF, MYS, NGA, BGD)] that improve [data (AUS)] surveillance, early warning and risk assessment; [promote evidence-based actions, [including prompt medical immunizations and medical treatments (BGD)] [risk communication and community engagement; and identify [and address (EU)] settings and activities presenting a risk of emergence and re-emergence of pathogens with pandemic potential. (DEL AF GROUP + EGY, CAF)] (DEL CHN, MYS, BGD)]

NOTE: Retain as it is (FJI)

3. Each Party commits to progressively strengthen pandemic prevention and coordinated multisectoral surveillance, taking into account its national capacities, including through:

3. Each Party [commits to (DEL UK, AUS, USA) (RETAIN TZA)] [shall undertake to (UK, AUS) (DEL TZA)] [intends to (USA)] progressively [strengthen pandemic prevention and [coordinated multisectoral (DEL RUS, IRN)] surveillance [capacities in accordance with IHR (RUS, IRN)], (DEL BGD, CHN)] [diagnostic and confirmatory testing (PHL)] [taking into account its national capacities (DEL USA)] [in line with obligations under the IHR to build core capacities for prevention, preparedness and response (USA, CHE)] [and laws (ISR)] [and contexts (CAN, MYS)], including through:

(a) coordinated multisectoral surveillance: (i) detect and conduct risk assessments of emerging or re-emerging pathogens, including pathogens in animal populations that may present significant risks of zoonotic spill-over, in accordance with the International Health Regulations (2005); and (ii) share the outputs of relevant surveillance and risk assessments within their territories with WHO and other relevant agencies;

(a) coordinated multisectoral surveillance [in line with the One Health Approach (EU, USA, NZL, AUS, TUR, FJI, NOR, MCO) (DEL IRN, BGD)]: (i) detect[ing (EU)] and conduct[ing (EU)] [multisectoral (UK, CAN, USA, BTN, NOR)] risk assessments of [emerging or re-emerging pathogens, [in accordance with the IHR (CAN)] including pathogens in [livestock and (EU)] animal populations that may present significant risks of zoonotic [emergence and (ISR)] spill-over[/spillback (USA)], (DEL BGD, MYS)] [in accordance with [relevant international standards (CAN, EU)] the International Health Regulations (2005); (DEL AF GROUP + EGY, BGD, CAN, RUS, MYS)] and [(ii) share the outputs of [relevant surveillance and (DEL BGD, MYS)] risk assessments [with relevant sectors (UK, AUS)] [within their territories (DEL BGD, MYS)] [as appropriate (IND, FJI)] with WHO [[and other relevant [international (EU)] agencies (DEL BGD, MYS)] [, (DEL UK, AUS, NOR)] ; (UK, AUS, NOR)] in particular to the quadripartite organizations (EU, NZL, AUS, CHE, TUR, NOR, MCO)]; (DEL AF GROUP + EGY,

BGD, MYS, NGA) [both in accordance with the IHR [(2005) (**DEL** NGA)] (AF GROUP + EGY, BGD, MYS, FJI)] [identify and monitor environmental factors contributing to these diseases (CAN, EU, AUS, USA, NOR)] [in accordance with IHR (RUS)] (**DEL (ii)** PAK, CHN, MYS)]

(b) community-based early detection and control measures: leverage community capacities, networks and mechanisms to detect unusual public health events and contain them at the source;

(b) [[promote (AF GROUP + EGY)] community-based early detection and control measures[: [leverage (**DEL** EU)] [strengthening (EU, NZL)] community capacities, networks and mechanisms (**DEL** AF GROUP + EGY)] [in order (AF GROUP + EGY)] to detect [unusual [or unexpected (UK, USA)] public health events (**DEL** PAK)] [to detect public health risks (PAK)] [affecting human or animal health (UK, AUS)] and contain them at the source [without unnecessarily affecting their daily lives and livelihoods (BGD)] (**DEL 3(b)** (RUS))];

RETAIN original text (IND, NGA)

(c) water, sanitation and hygiene: strengthen efforts to ensure access to safe water, sanitation and hygiene, including in hard-to-reach settings;

(c) [social determinants of health (MEX, COL)] [water, sanitation and hygiene: (**DEL** MEX, COL) (**RETAIN** IND, USA)] [strengthen efforts (**DEL** EU)] [taking measures (EU)] [to address the social, economic and environmental determinants of health, including (MEX, COL)] to ensure access to safe water, sanitation and hygiene, including in hard-to-reach settings;

RETAIN original (CHN, NGA)]

(d) infection prevention and control: implement active infection prevention and control measures in all health care facilities and institutions, in line with relevant international standards and guidelines;

(d) infection prevention and control: [(i) taking measures to enable effective immunization and vaccination, which aim to reduce pandemic risks, (EU, NZL)] implement[ing (EU)] [active (**DEL** PAK, JPN)] [actively implement (JPN)] infection prevention and control measures in all health care [facilities and institutions (**DEL** EU)] [settings (EU)], in line with [national (AF GROUP + EGY, URY)] relevant international standards and guidelines [adopted by the Conference of the Parties (CAF)] [, including by requiring health care facilities and institutions [and live animal settings, including veterinary practices (UK) (**DEL** NGA)] to have in place a regularly updated infection, prevention and control programme and by taking measures to support sound management of healthcare wastes (EU)]; [as well as measures to address the health

impact of environmental factors associated with the risk of zoonotic disease spillover and spillback. (CAN, AUS)]

RETAIN original text (IND, CHN)

(e) zoonotic spill-over and spill-back prevention: (i) identify settings and activities that create or increase the risk of disease emergence and re-emergence at the human–animal–plant–environment interface; (ii) take measures to reduce risks of zoonotic spill-over and spill-back associated with these settings and activities, including measures aimed at safe and responsible management of wildlife, farm and companion animals, in line with relevant international standards and guidelines;

(e) zoonotic spill-over and spill-back prevention: [(i) identify[ing (EU)] settings and activities that create or increase the risk of disease emergence and re-emergence at the human–animal[–plant[–environment (RETAIN BOL)] (**DEL RUS, CHN**) interface; (DEL AF GROUP + EGY) (ii) take[ing (EU)] [regulatory and other (EU)] measures [to recognize and (PHL)] to reduce risks of zoonotic spill-over [and spill-back (**DEL RUS**)] [at the animal-human-environment interface] (AF GROUP + EGY)] [associated with these settings and activities, including measures aimed at [prevention at source, as well as (EU)] safe and responsible management [and handling (EU)] of [wildlife, farm and companion (**DEL EU**)] [livestock, wild and domestic (EU)] animals, (**DEL AF GROUP + EGY**)] [[in line with (DEL USA, BRA)] [considering relevant (USA, BRA)] [national and (AF GROUP + EGY)] relevant international standards and guidelines (**DEL RUS**)] [, as well as measures to address the health impact of environmental factors associated with the risk of zoonotic disease spillover and spillback (EU)];

RETAIN original text (IND)

(f) laboratory biosafety and biological risk management: develop, strengthen and maintain biosafety and biological risk management, in particular with regard to laboratories and research facilities, in order to prevent the accidental exposure, misuse or inadvertent release of pathogens, consistent with applicable international and national rules, standards and guidelines;

[*ebis*. Wildlife management, (i) taking action to prevent the development and spread of zoonotic disease arising from trade and consumption of wild animals, or products thereof, posing a high risk of zoonotic disease and (ii) facilitating timely and safe sharing of biological samples of domestic and wild animals for zoonotic disease research. In taking such actions, the Parties shall involve indigenous peoples and local communities and taking into account the rights, as set out in the UN Declaration on the Rights of Indigenous Peoples, needs and traditional practices of indigenous peoples under their jurisdiction. (EU, AUS)]

laboratory [biosafety and (**DEL JPN**)] [, biosecurity (AUS, SAM)] [and bio[logical (**DEL JPN**)] (**DEL RUS**) (**RETAIN JPN**)] risk management: develop[ing (EU)], strengthen[ing (EU)] and maintain[ing (EU)] [biosafety and (DEL JPN)] [, biosecurity and (AUS)] [bio[logical (DEL JPN)] risk (**DEL RUS**) (**RETAIN JPN**)] management, in

particular with regard to laboratories and research facilities, in order to prevent the [unintentional or (PHL)] accidental exposure, [misuse (DEL RUS)] or inadvertent release of pathogens, [including through biosafety and biosecurity training and practices, regulating access to sensitive facilities and ensuring the safety and security of transportation and cross-border transfer, in accordance (EU, NOR)] [consistent (DEL EU)] with [national and with (AF GROUP + EGY)] applicable international and national [laws, regulations, (JPN)] rules, standards and guidelines [and best practices (USA)];

[RETAIN original text (CHN)]

(g) vector-borne disease surveillance and prevention: develop, strengthen and maintain capacity to conduct risk assessments of vector-borne diseases that may lead to pandemic situations; and

(g) [vector-borne disease surveillance and prevention: develop[ing (EU)], strengthen[ing (EU)] and maintain[ing (EU)] capacity to conduct [surveillance (CAN)] risk assessments [and prevention activities for (CAN)] [of (DEL CAN)] vector-borne diseases that may lead to pandemic situations; and (DEL 4.3(g) CHN, BOL)]

(h) antimicrobial resistance (AMR): take measures to address pandemic-related risks associated with the emergence and spread of pathogens that are resistant to antimicrobial agents, including through the development and implementation of national and, where relevant, regional antimicrobial resistance action plans, taking into account relevant international guidelines, and with the aim of facilitating affordable and equitable access to antimicrobials.

(h) antimicrobial resistance (AMR): take[ing (EU)] measures to address pandemic-related risks associated with the [emergence (DEL NOR)] [selection (NOR)] [and re-emergence (PHL)] and spread of pathogens that are resistant to [antimicrobial agents (DEL PHL)] [drug-resistant pathogens (PHL)], including through the development [and (DEL EU)] [, (EU)] implementation [and regular review (EU)] of national and, where relevant, regional antimicrobial resistance action plans, [which should include measures to promote the prudent use of antimicrobials across sectors and facilitate affordable and equitable access to antimicrobials (UK, AUS, NOR)] [and global action plans that entail collaboration across all relevant sectors and disciplines (PHL)] taking into [account (DEL USA)] [consideration (USA)] relevant [national and (PHL)] international guidelines [instruments and policies (PHL)], [targets and plans (EU)] and [with the aim of [facilitating affordable and equitable access to antimicrobials (DEL PHL) (RETAIN AF GROUP + EGY)] (DEL JPN)] [ensuring equitable and sustainable access to quality and affordable antimicrobials and their alternatives (PHL)] [and their research and development (AF GROUP + EGY)] [for this purpose, the parties shall: (i) work towards implementing internationally agreed commitments and targets on AMR, including by setting out national or regional targets, (ii) strengthen infection prevention and control, as well as antimicrobial stewardship, including through the prudent use of antimicrobials in humans and animals, and (iii) increase antimicrobial research and development and investment, where appropriate, in new and existing medicines,

diagnostic tools, vaccines and other interventions, as well as facilitating affordable access to the same (EU, AUS, CHE)].

RETAIN original text (IND, CHN)

[NOTE: RESERVE on all EU and UK proposals to Article 4.3 (BRA, PAK, TZA, CHN, BGD, MYS, IND, IRN, PSE, IDN, GUA, SYR, ESW, MEX, COL, PER, SLV, ARG, EGY, DOM, URY, ZMB, BOL, MWI, UAE, KEN, BWA, RUS)

[**DEL** all EU and UK proposals: AF GROUP + EGY)]

4. To implement the provisions in this Article, each Party shall:

4. To implement the provisions in this Article, each Party shall [endeavour to (AF GROUP + EGY)]:

(a) taking into account national capacities, ensure that relevant national, and where applicable regional, action plans, policies and/or strategies, include comprehensive, coordinated and multisectoral pandemic prevention measures and surveillance;

(b) develop, strengthen and maintain pandemic prevention capacities to complement the core capacities for surveillance, prevention and response as set out in the International Health Regulations (2005); and

(c) take into account recommendations, guidelines and standards developed and adopted by WHO and other relevant intergovernmental organizations or bodies, in the development of relevant national and, where applicable, regional policies, strategies and measures to prevent pandemics.

(c) take into account recommendations, guidelines and standards developed [and adopted (**DEL** AF GROUP + EGY)] by WHO and other relevant intergovernmental organizations [or bodies (**DEL** AF GROUP + EGY)] [and adopted by the Conference of the Parties (AF GROUP + EGY)], in the development of relevant national and, where applicable, regional policies, strategies and measures to prevent pandemics.

5. The Parties recognize that environmental, climatic, social, anthropogenic and economic factors increase the risk of pandemics and endeavour to identify these factors and take them into consideration in the development and implementation of relevant policies, strategies and measures, including by strengthening synergies with other relevant international instruments and their implementation.

6. The Conference of the Parties may adopt, as necessary, guidelines, recommendations and standards, including in relation to pandemic prevention capacities, to support the implementation of this Article.

Article 5. One Health approach to pandemic prevention, preparedness and response

One Health approach [to pandemic prevention, preparedness and response (DEL CHN, BGD, PAK, URY, SYR, TUR)]

1. The Parties commit to promote a One Health approach for pandemic prevention, preparedness and response that is coherent, comprehensive, integrated, coordinated and collaborative among relevant actors and sectors.

1. The Parties [commit (DEL USA, UK, BRA, PAK) (RETAIN BGD)] [resolve (USA, BRA, PAK)] [shall undertake (UK, CAN, AUS)] to promote [a (DEL EU, CAN, BRN) (RETAIN AF GROUP + EGY, PAK, MYS)] [the (EU, CAN, UK, NOR, BRN, USA, AUS) (DEL AF GROUP + EGY, PAK)] One Health approach for pandemic prevention, preparedness and response [and recovery (IND)] [without undermining their domestic public health priorities (BGD)] [recognizing the interconnection between people, animals and the environment (USA, EU, PER, UK, TUR, COL, ROK)] that is coherent, comprehensive, integrated, coordinated [, interoperable (PER)] and collaborative among relevant [organizations, [NOTE: footnote “this includes collaboration with WHO, WOAHA, FAO, and UNEP, presently known as the quadripartite.” (NOR, ROK)]] actors and sectors [in collaboration with WHO, WOAHA, FAO, and UNEP, collectively known as the quadripartite, and other relevant organizations (USA, COL, UK, AUS, MCO) (DEL IND, BRA, FJI, PAK)].

[Support Bureau’s text (IND, URY, BRA, FJI, IDN, MYS, BRN, AF GROUP + EGY, CHN, MEX, IRN, BOL, CHL)]

2. For this purpose, each Party shall, taking into account its national circumstances and capacities, take measures to:

2. For [this (DEL JPN)] [the (JPN)] purpose [of pandemic prevention, preparedness and response (JPN)], each Party shall, taking into account its national circumstances and capacities, [and other international obligations, (ARG, URY)] take measures to:

[Support Bureau’s text (MYS, URY, COL)]

(a) implement relevant national policies, strategies and measures that reflect a One Health approach;

(a) [[develop and (EU, FJI)] implement [and regularly review national and, where applicable, regional (EU)] relevant national policies, strategies [and measures (DEL AF GROUP + EGY)] [for pandemic prevention, preparedness and response (EU)] that reflect [implement the (CAN, AUS)] [a (RETAIN MYS) (DEL EU)] [the (EU, UK,

NOR, USA, AUS, TUR)] One Health approach [in national policies, strategies and plans (CAN, AUS)]; (**DEL** (a) (BGD))

[Put 2(a) under 4.3 (RUS, IRN)]

[Support Bureau's text (FJI, URY)]

(b) promote the effective and meaningful engagement of communities in the development and implementation of policies, strategies and measures to prevent, detect and respond to zoonotic outbreaks; and

(b) [Promote (**DEL** EU)] [ensure (EU)] the effective and meaningful engagement of communities in the development and implementation of policies, strategies and measures to prevent, detect and respond to zoonotic outbreaks; and (**DEL** (b) BGD, AF GROUP + EGY)]

(c) promote or establish, as necessary, One Health workforce training and continuing education programmes for public health, animal health and environment sectors, to build complementary skills, capacities and capabilities.

(c) [promote or establish, as necessary, [One Health [multidisciplinary (EU)] [workforce (**DEL** AF GROUP + EGY) (RETAIN IDN)]] training and continuing education programmes for public health, animal health and environment sectors, [to build complementary skills, capacities and capabilities [as well as to promote awareness with educational strategies for communities and other relevant stakeholders (MEX)]. (**DEL** AF GROUP + EGY)]

[NOTE: Move to ART 7 (RUS)]

[Support Bureau proposal on para 2 (BRA, FJI, BRN, IND, CHN)]

3. The Parties shall contribute to the further development and updating of international standards and guidelines to detect, reduce risks of, monitor and manage zoonotic spill-over and spill-back, in collaboration with WHO and relevant intergovernmental organizations.

3. [The Parties shall contribute to the further development [and (DEL USA)] [, (USA)] updating [adoption and implementation (USA)] of international[ly agreed (IRN)] standards and guidelines [in line with the One Health approach (EU)] to [prevent, (EU)] detect, reduce risks of, monitor and manage zoonotic spill-over and spill-back, in collaboration with WHO [, WOA, FAO and UNEP, collectively known as the quadripartite (USA)] and relevant intergovernmental organizations [in particular the quadripartite organizations (EU, CAN, MCO) (**DEL** IND)]. (**DEL Para 3** AF GROUP + EGY, BGD, CHN) (**RETAIN Para 3** UK)]

[Retain Bureau's text (FJI, IND, URY, IDN)]

4. The Parties shall develop and implement or strengthen, as appropriate, bilateral, subregional, regional and other multilateral mechanisms to enhance financial and technical support, assistance and cooperation, in particular in respect of developing countries, in relation to promoting and taking measures towards One Health.

4. The Parties shall develop [and implement (DEL USA)] or strengthen, [as appropriate, (DEL USA)] [to the extent possible and according to their national law (USA)] bilateral, subregional, regional and other multilateral mechanisms [to enhance (DEL PER, COL)] [to provide (PER, COL)] [financial and (DEL EU) (RETAIN BRA, IND, NPL, BGD, NGA, ECU, BOL)] technical [support (DEL EU) (RETAIN (BRA, BOL))], assistance [and capacity building (EU, COL) (DEL BRA)] [and cooperation, in particular in respect of [developing countries, (RETAIN NPL, BRA, IND, ECU) (DEL EU) (DEL BRA)] [with an emphasis on least developed countries (USA)] [with particular regard to the needs of the least developed country parties and other parties in need (EU) (DEL COL, BRA, SYR, BGD, NGA, CHN, IND, ECU)] in relation to promoting and [taking measures [towards (DEL USA)] [in line with the One Health approach (USA)] (DEL EU) (RETAIN BRA)] [implementing the (EU, JPN) (DEL BRA)] [a (AF GROUP + EGY)] One Health [approach (AF GROUP + EGY, EU, COL, JPN)] [without undermining the developing countries' domestic public health priorities (MYS, BGD)].

[RETAIN Bureau's text (FJI, IND, URY, IDN, CHN, BOL)]

[NOTE Move to ART 16 (RUS)]

[DEL Art 5 and move relevant provisions to appropriate articles (RUS, PAK)]

[Support Bureau's text on ART 5 (CHL)]

Article 6. Preparedness, health system resilience and recovery

1. Each Party commits to develop, strengthen and maintain its health system, including primary health care, for pandemic prevention, preparedness and response, taking into account the need for equity and resilience, with a view to the progressive realization of universal health coverage.

1. Each Party [commits (DEL AF GROUP + EGY, PAK, UK, BGD, UAE, QAT, USA, CHN) (RETAIN NOR, NZL)] [shall endeavour (AF GROUP + EGY, PAK, BGD, CHN, SYR) (DEL NOR, NZL)] [shall undertake (UK, UAE, AUS, QAT, JPN)] [intends (USA)] to develop, strengthen and maintain its [resilient (RUS, UAE) (DEL NGA)] health system, [including (DEL PHL)] [giving emphasis on (PHL)] primary health care, for pandemic prevention, preparedness and response, [taking into account the need for equity and resilience, (DEL RUS, UAE) (RETAIN NGA)] with a view to [the progressive realization of (DEL BRA, BGD, AUS, SYR, CHN, IRN)] [achieve (BRA, BGD, AUS, SYR, JPN, CHN, MYS)] universal health coverage.

2. Each Party commits, in accordance with applicable laws and regulations, to strengthen and reinforce health system functions, including by adopting and/or developing policies, plans, strategies and measures, as appropriate, for:

2. Each Party [commits (DEL UK, USA, JPN)] [shall undertake (UK, JPN)] [intends (USA)], in accordance with [applicable (DEL RUS)] [national (RUS)] laws and regulations [under international law (RUS)] [as well as its national capacity (MEX)], to strengthen and reinforce health system functions, including by adopting and/or developing [multisectoral (AUS, UK)]

policies, plans, strategies and measures, as appropriate [in line with the One Health approach (USA)], for:

[RETAIN Bureaus text (CHN)]

(a) sustaining and monitoring the timely provision of, and equitable access to, quality routine and essential health services during pandemics with a focus on primary health care, routine immunization and mental health care, and with particular attention to persons in vulnerable situations;

(a) sustaining and monitoring the timely provision of, and equitable access to, quality routine and essential health [care (PAK, EGY) (~~NOR, NZL~~)] services [and health products (BRA, BGD, BOL, MYS)] [during pandemics (~~MEX, BRA, COL~~)] [and humanitarian emergencies (PSE, SYR, TUN, EGY, PAK, BGD, MYS, IRN)] with a focus on primary health care, routine immunization and mental health [care (~~AUS~~)] [and psychosocial support (AUS, UK)] [and noncommunicable diseases, neglected tropical disease and improved nutrition for women and children (BOT, NGA, JPN, TUN)], and with particular attention to persons in vulnerable situations [during humanitarian emergencies (PSE, SYR, TUN, EGY, IRN)] [marginalized sectors and people living in remote and disadvantaged areas (PHL, BOL)];

[*abis.* Improving national capacities to adopt transparent, cost-effective procurement practices and supply chain management of health products (BRA, BGD, COL, BOT)]

(b) developing, strengthening and maintaining health infrastructure as well as public and animal health institutions, including academic and research centres, at national, regional and international levels;

(b) developing, strengthening and maintaining health infrastructure as well as public [health (USA, UK)] and animal health institutions, including academic and research centres, at national, regional and international levels;

(c) developing post-pandemic health system recovery strategies;

(c) [developing (~~AUS, CHN, SGP~~)] [and strengthening (AF GROUP + EGY)] post-pandemic health system recovery [strategies (~~AUS, CHN, SGP~~)];

(d) developing, strengthening and maintaining, as necessary, public health, animal health and environmental laboratory and diagnostic capacities, and associated national, regional and global networks, through the application of relevant standards and protocols for laboratory biosafety and biological risk management;

(d) developing, strengthening and maintaining, as necessary, public health, animal health and environmental laboratory and diagnostic capacities, and associated national, regional and global networks [including through the application of relevant standards and protocols (EU)], through the application of [national and other relevant international (AF GROUP + EGY)] relevant standards and protocols [for laboratory [biosafety and (DEL JPN)] [for prevention and control (EU)] [biosecurity (PHL, AUS, CHN, UK) (DEL PAK, BGD, IRN)] [bio[logical (DEL JPN)] risk management (DEL RUS, CHN, IRN)] (DEL PAK, BGD)];

(e) developing, strengthening and maintaining health information systems for early detection, forecasting, and timely information sharing; civil registration and vital statistics; and associated digital health and data science capacities; and

(e) developing, strengthening and maintaining [as appropriate (USA)] health information systems for [routine monitoring, (UK)] [collection of epidemiological information, as appropriate, for (USA)] early detection, forecasting, and timely information sharing [and timely information sharing (RUS)] [in accordance with the IHR (AF GROUP + EGY, RUS)]; [[which may include (USA)] civil registration and vital statistics; (DEL PAK, BGD)] and associated digital health and data science capacities; and

(f) promoting the use of social and behavioural sciences, risk communication and community engagement for pandemic prevention, preparedness and response.

[(f)*bis*. Strengthening leadership, coordination, and management structures for pandemic prevention, preparedness and response (AUS)]

3. The Parties commit to cooperate, within means and resources at their disposal, and with the support of the WHO Secretariat and other relevant organizations, in order to provide or facilitate financial, technical and technological support, assistance, capacity-strengthening and cooperation, in particular in respect of developing countries.

3. [The Parties commit to cooperate, [within means and resources at their disposal, and (DEL AF GROUP + EGY, CHN)] with the support of the WHO Secretariat and other relevant organizations, in order to provide or facilitate financial, technical and technological support, assistance, capacity-strengthening [and cooperation, (DEL AF GROUP + EGY)] in particular in respect of developing countries [this provision shall apply in all phases of the pandemic prevention, preparedness and response cycle (AF GROUP + EGY, PHL, IDN)] [in line with Article 16, 19 and 20 (AUS, EU, SGP)].

(DEL PARA 3 MEX)]

[RESERVE PARA 3 (USA, UK)]

4. The Parties shall identify and promote relevant international data standards and interoperability that enable timely sharing of public health data for preventing, detecting and responding to public health events.

4. [[Under the leadership of WHO, with collaboration with relevant international organizations, (MEX, NOR, EU, FIJ, SGP, IDN)] The [Conference of the (BGD, PAK)] Parties [develop (BGD, PAK)] shall [[identify (~~DEL IND, PAK, CHN~~)] [endeavour to develop (IND, PAK, MYS)] and [promote (~~DEL EU~~) (~~RETAIN CHN~~)] [endeavour to apply and promote interoperability (EU)] [in accordance with national law (CHN, IDN, MYS, IDN, SYR)] [to the extent appropriate and in accordance with applicable law (USA)] relevant [internationally agreed (IRN)] [international data standards (~~DEL BGD, PAK~~)] [rules, recommendations, guidelines or standards as appropriate, governing the information and data exchange pursuant to this agreement and the IHR (2005) with a view to promoting accountability and trust (BGD, PAK)] [and (~~DEL IND~~)] interoperability (~~DEL IND, PAK~~)] [le systems such as Digital Public Infrastructure (IND, PAK)] that enable timely (~~DEL BGD, PAK~~)] sharing of [public health data (~~DEL IND, PAK~~)] [information as per respective domestic legal frameworks (IND, PAK)] for preventing, detecting and responding to public health events. [The WHO shall apply these rules, recommendations, guidelines or standards while collecting, processing or sharing data and information under this agreement [or IHR (2005) (~~DEL PAK, TUN, SYR~~)]. (BGD)]

(~~DEL PARA 4 AF GROUP + EGY~~) (~~RETAIN BRN, NOR~~)

[~~RETAIN~~ Bureau text w/MEX proposal (CAN, NOR, BRN, JPN, COL, SGP, UK)]

Article 7. Health and care workforce

1. Each Party, in accordance with its national circumstances, commits to take, where appropriate, the necessary measures to safeguard, protect, invest in, retain and sustain an adequate, skilled and trained health and care workforce, with the aim of strengthening capacities for pandemic prevention, preparedness and response, while maintaining quality essential health services and essential public health functions during pandemics. To this end, each Party commits, where appropriate, to:

1. Each Party, in accordance with its national circumstances, [commits (~~DEL USA~~)] [intends (USA)] to take[, [where (~~DEL AF GROUP + EGY, BGD, SYR, AUS, TUN, PHL~~)] [as (AF GROUP + EGY, BGD, SYR, AUS, TUN)] appropriate, (~~DEL EU, AUS, PHL~~)] the necessary measures to safeguard, protect, invest in, retain and sustain an adequate, skilled and trained [health and care workforce (~~DEL DOM~~)] [human resources for health (DOM)], [with the aim of strengthening capacities for pandemic prevention, preparedness and response, while maintaining quality essential health services and essential public health functions during pandemics [and humanitarian (PSE, SYR)] emergencies To this end, each Party [commits (~~DEL USA~~)] [is encouraged to take the following measures (USA)] [to strengthen (IND, BGD)], where appropriate, to:

[1(a)(a). Establish effective social dialogue mechanisms including tripartite or bipartite consultative institutions and collective bargaining between employers and workers or health and care workers where they do not exist. (ZAF, BRA, TUN)]

(a) protect the safety and security of the health and care workforce, including through strengthening decent work conditions, addressing mental health and well-being, ensuring priority access to necessary tools and supplies, including to pandemic-related products during pandemic emergencies, as well as addressing harassment, violence and threats against health and care workers;

(a) [strengthening decent work conditions of human resources for health, including through protecting their safety and security (MEX, BRA, TUN)] [[ensure efforts to (IND, BGD)] protect the safety and security of the health and care workforce [such means may include (USA)], including through [the provision of (IND, BGD)] [strengthening (~~DEL~~ IND, BGD, EU, PHL)] [ensuring (EU, PHL)] [decent (~~DEL~~ USA) work[ing (USA)] conditions, [addressing (~~DEL~~ PHL)] [promoting (PHL)] [their (MEX, BRA, TUN)] mental health and well-being [adequate health insurance (AF GROUP + EGY, BGD, SYR, TUN, SAU)], ensuring [their (MEX, TUN)] [priority (~~DEL~~ USA) (RETAIN AF GROUP + EGY)] access to [pandemic-related (IND, BGD)] necessary tools [and (~~DEL~~ IND, BGD)] supplies [and products (IND, BGD, AF GROUP + EGY)], [including to pandemic-related [health (USA)] products (~~DEL~~ IND, BGD)] [during pandemic[s and humanitarian (PSE)] [emergencies (~~DEL~~ MEX)], as well as [preventing (PHL, CAN, MCO, NOR, AUS)] [and (CAN, MCO, PHL)] addressing harassment, violence and threats against health and care workers [, in particular women (NOR, MEX, AUS) (~~DEL~~ RUS)];

[Alt 1(a) protect the safety and security of the health and care workforce, including through strengthening decent work conditions, addressing mental health and wellbeing, as well as addressing harassment, violence and threats against health and care workers; (BRA, DOM) (~~DEL~~ FJI)]

[1(b) ensure priority access of health workers to necessary tools and supplies, specially to pandemic-related products during pandemic emergencies, (BRA, DOM) (~~DEL~~ FJI)]

(b) address disparities, inequalities, discrimination, stigma and bias, including issues related to gender and youth and unequal remuneration and opportunities, such as barriers faced by women to reaching leadership and decision-making roles, within the health and care workforce particularly during health emergencies, to support the meaningful representation, engagement, consultation, participation and empowerment of all health and care workers;

(b) address disparities, inequalities, discrimination, stigma and bias [such means may include (USA)], [including [issues (~~DEL~~ EU)] [as (EU)] [on unequal remuneration and opportunities and those related to gender and [youth (~~DEL~~ EU, UK)] [age (EU, UK)] [representation (~~DEL~~ RUS)] (PHL, CAN, NOR, AUS, FJI, MEX, COL, NZL, UK) (~~DEL~~ EGY, AF GROUP + EGY, IRN)] related to [anti-union policies (BRA)] [gender and youth and (~~DEL~~ AF GROUP + EGY, BGD, SYR, SAU, TUN, QAT, PAK)]

unequal remuneration and opportunities, such as barriers faced by women [, youths and people with disabilities (AF GROUP + EGY, BGD, SYR, TUN)] [to (DEL AF GROUP + EGY, BGD, SYR, TUN)] [in (AF GROUP + EGY, BGD, SYR, TUN)] reaching leadership and decision-making roles, (DEL CHN)] within the health and care workforce [to the extent possible (IND, BGD)] particularly during health emergencies [and pandemics (MEX)], to [support the meaningful representation, engagement, consultation, participation and empowerment of all health and care workers; (DEL CHN, PAK)]

(c) establish and maintain national workforce planning systems and strategies to rapidly, effectively and efficiently deploy health and care workers to maintain quality essential health services and essential public health functions, prior to and during pandemics;

(c) [strengthen efforts towards (IND, BGD)] establish[ing (IND, BGD)] and maintain[ing (IND, BGD)] cog (DEL USA)] national [and/or subnational (CAN)] [plans (USA) systems and strategies to rapidly, effectively and efficiently deploy health and care workers [to maintain (DEL AF GROUP + EGY, BGD, SYR, TUN, CHN)][for (AF GROUP + EGY, BGD, SYR, TUN, CHN) quality essential health services and essential public health functions, [[prior to and (DEL IND, AF GROUP + EGY, BGD, SYR, TUN)] [at all times (AF GROUP + EGY, BGD, SYR, TUN, PSE)] [especially (IND, BGD)] during [pandemics (DEL USA)] [pandemic emergencies (USA)]; (DEL CHN)]

(d) take measures to ensure self-sufficiency in health and care workforce education, employment and retention in advance of public health emergencies; and

(d) take measures to ensure [greater (UK)] self-sufficiency in health and care workforce education, employment and retention [particularly in (MEX, PAK)] [to the extent possible, especially in times of (IND, BTN, BGD)] [in advance of (DEL IND, AF GROUP + EGY, BGD, SYR, MEX, TUN, CHN, PAK)] [at all times and during (AF GROUP + EGY, BGD, SYR), TUN] public health emergencies [and pandemics (MEX, PAK)]; and

(e) strengthen, pre- and in- service competency-based education and training, deployment, remuneration, distribution and retention, including in rural and hard-to-reach areas, of the health and care workforce.

(e) [[maintain and (USA)] take measures to (IND, BTN, BGD)] strengthen, pre- and in-service competency-based education and training, [supportive supervision, (UK, UAE)] deployment, remuneration, distribution and [address issues impacting (USA)] retention [of the health and care workforce (IND, BTN, BGD)], [including (DEL CHN)] [particularly (CHN)] in rural and hard-to-reach areas[, of the health and care workforce (DEL IND, BTN, BGD)] [especially in times of public health emergencies (IND, BTN, BGD, IDN)].

[(e) develop policies to protect health and care workers, as well as their families, in the event of injury, sequelae or death during the response to a public health emergency (BRA, MEX, TUR)]

[NOTE: Add “care” to health services throughout (EGY) (Oppose by AUS)]

2. The Parties commit to assist and provide financial and technical support within means and resources at their disposal to other Parties in need, with special attention to the needs of countries that are particularly vulnerable to the adverse effects of pandemics, in order to strengthen and sustain a skilled and competent health and care workforce capable of maintaining quality essential health services, essential public health functions and emergency preparedness and response, at subnational, national and regional levels.

2. The Parties [commit to (~~DEL MEX, IND, PAK~~) (**RETAIN EU**)] [in accordance with Articles 16, 19 and 20 (EU, AUS, NOR, SGP)] [shall (MEX, IND, PAK)] [endeavour to (IND, PAK)] assist and provide financial and technical support within means and resources at their disposal to other Parties in need, with special attention to the needs of [developing (PAK, AF GROUP + EGY, SYR)] countries [as well as those countries (PAK, SYR)] that are particularly vulnerable to the adverse effects of pandemics, in order to strengthen and sustain [and adequate (PHL)] a skilled and [competent (~~DEL PHL~~)] [trained (PHL)] health and care [workforce (~~DEL PHL~~)] [workers (PHL)] [capable of maintaining quality essential health services, essential public health functions and emergency preparedness and response, (~~DEL CHN, PAK~~)] at [subnational, (~~DEL TUR~~)] national and regional levels.

[**RESERVE Para 2** (address under Art 19): USA, UK]

3. The Parties commit to collaborate, where appropriate, through multilateral and bilateral arrangements and consistent with the WHO Global Code of Practice on the International Recruitment of Health Personnel and other applicable international norms, codes and standards, promoting ethical, international recruitment principles and equity, to minimize the negative impact of health workforce migration on health systems while respecting the freedom of movement of health professionals.

3. The Parties [commit to (~~DEL IND, BGD, USA~~)] [may (IND, BGD)] [shall undertake to (USA)] collaborate, [where (DEL AF GROUP + EGY, BGD, SYR, TUN)] [as (AF GROUP + EGY, BGD, SYR, TUN)] appropriate [and in accordance with applicable law (USA)], through multilateral and bilateral arrangements and [taking into account (EU)] [consistent with (~~DEL EU~~)] the [WHO Global Code of Practice on the International Recruitment of Health Personnel [, fully abiding by the WHO safeguard list (AF GROUP + EGY, BGD, SYR, TUN, PHL, FJI)] and other (~~DEL CHN, IND~~)] applicable international norms, codes and standards, [promoting ethical, international recruitment principles and equity, to minimize the negative impact of (~~DEL USA, IND~~)] [on (USA)] health workforce migration [issues, to minimize impacts (USA)] on health systems [while respecting [core labour standards and (BRA)] the freedom of movement of health professionals [during pandemics (CHN, JPN) (~~DEL MEX~~)] (~~DEL USA~~)].

[3alt. The parties may collaborate through multilateral and bilateral arrangements to ease mobility issues during pandemics and facilitate rational deployment of public health workforce to parties upon request, based on emergent public health need, while minimizing any negative impact to health systems. (IND, BGD)]

[SUPPORT Bureau's text: UK, PHL, AUS, NOR]

4. The Parties, building on existing bilateral and multilateral networks, shall invest in establishing, sustaining, coordinating and mobilizing a skilled and trained multidisciplinary global public health emergency workforce that is able to manage health emergencies closest to where they start. For this purpose, Parties shall invest in designating, at national and where appropriate regional level, interdisciplinary emergency health teams to ensure the essential functions and surge capacities necessary to deploy in a pandemic emergency and to support Parties upon request. Parties having established emergency health teams should inform WHO thereof and [make best efforts to respond to requests for deployment by Parties affected by a pandemic emergency to which they are not able to fully respond with their national resources.

4. The Parties [, WHO and regional organizations shall undertake to cooperate (USA)], [optimizing (PHL)] [[building on (DEL PHL, JPN)] [coordinating with (JPN)] existing [and future (PHL)] bilateral and multilateral networks, (DEL CHN)] shall [strengthen efforts towards (IND, BGD)] [invest[ment (IND, BGD)] in (DEL JPN)] [endeavour to (JPN, MYS, EU, CAN)] [establish[ing (DEL JPN)], (DEL IND, BGD) (RETAIN EU)] sustain[ing (DEL JPN)], [coordinating (DEL JPN)] and mobiliz[ing (DEL JPN)] [a skilled and trained (DEL IND, BGD)] multidisciplinary [global (DEL UK, CHN, MYS) (RETAIN NGA)] public health [emergency (DEL IND, BGD)] workforce [skilled and trained in emergency response (IND)] [that [could be globally deployable and (UK, CAN)] is able to manage health emergencies [closest to where they start (DEL JPN)] [For this purpose, Parties shall [invest in (DEL IND, BGD, JPN, USA, UK)] [establish or designate to the extent appropriate and in accordance with applicable law (USA)] [endeavour to (JPN, MYS, UK)] designat[ing (DEL IND, BGD)] [e (IND, BGD)], [at national and (DEL JPN)] where appropriate [regional level (DEL JPN)] [and by building on existing networks (USA)], [interdisciplinary (DEL IND, BGD)] [suitable (IND, BGD)] emergency health teams to ensure the essential functions [and (DEL PHL)] [meet (PHL)] [surge capacities necessary to deploy in a pandemic emergency (DEL PHL)] [and (PHL)] [at all times (PSE)] [and where appropriate (UK)] and to support Parties upon request [through deployment as necessary (PHL)] during a pandemic emergency (DEL CHN)].

Parties having established [or designated (IND, BGD)] emergency health teams [should (DEL PHL)] [shall (PHL)] inform WHO thereof and [make best efforts (DEL AF GROUP + EGY, BGD, SYR, TUN) (DEL PHL)] [endeavour (PHL)] [be prepared (AF GROUP + EGY, BGD, TUN)] to [respond to requests for deployment by Parties (PHL)] [support Parties requesting for deployment of additional health teams and whose ability (PHL)] [affected by a pandemic emergency [to which they are not able (DEL PHL)] to fully respond [with their national resources (DEL PHL)] [is limited by their current capacity and resources during pandemic emergency (PHL)]. (DEL JPN)] [The Conference of the Parties shall develop a code of conduct for personnel to be deployed. (BGD, IND, IND)] (DEL MEX)]

5. The Parties shall develop or strengthen, leveraging or building on existing national and regional education institutions, centres of excellence and networks, a skilled and competent health and care workforce at subnational, national and regional levels, with the capacity to maintain quality essential health services, essential public health functions and to respond rapidly to public health threats of pandemic potential.

5. [The Parties[, WHO and regional organizations (USA)] [shall (**DEL USA**)] [are encouraged to collaborate on (USA)] develop[ing (USA)] [and/ (AF GROUP + EGY, BGD, SYR, TUN)] or strengthen[ing (USA)] [efforts (IND, BGD)], leveraging [and/ (AF GROUP + EGY, BGD, SYR, TUN)] or building on existing national and regional education institutions, centres of excellence and networks, a[n adequate (PHL)] skilled and [competent (**DEL PHL**)] [trained (PHL)] health and care workforce [including emergency health teams (EU)] at [subnational, (**DEL TUR**)] national and[/or (CAN)] regional levels, [with the capacity to maintain quality essential health services, essential public health functions and to respond rapidly to public health threats of pandemic potential. (**DEL CHN, SYR**)]

(DEL PARA 5 (NOR))

6. Each Party commits to take the necessary steps to ensure decent work conditions and a safe and healthy environment for other essential workers that provide essential public goods and services during pandemics.

6. [Each Party [commits (**DEL USA**)] [intends (USA)] to take the [necessary (**DEL USA**)] steps [in accordance with applicable laws and practices (USA)] [in line with national context (NGA)] [to the extent possible (IND, BGD, SYR, NGA IDN)] to [ensure decent (**DEL USA**)] (**RETAIN MEX, BRA, CHL, CRI**)] [promote (USA)] work[ing (USA)] conditions and a safe and healthy [work (USA)] environment for [all health and care workers as well as (PHL)] other essential workers that provide essential public goods and services [to support efforts (PHL)] [both before and (PHL, SYR)] during pandemic[s (**DEL USA**)] [emergencies (USA)].

DEL PARA 6 (CHN, PAK, IRN)

[RETAIN Bureau text for PARA 6 (CRI, EU)]

[[7. The Parties shall commit to develop, in line with IHR provisions, as necessary, and implement coordinated policies and measures for the protection of workers who are essential for the normal functioning of critical supply chains during pandemics, such as [seafarers and (UK, PHL)] cross-border transport workers, among others, facilitating their transit and transfer [according to national norms (IND)] as well as ensuring their access to medical care, as appropriate. (AF GROUP + EGY, BGD, SYR, TUN, IDN, PSE, PHL, UK, EU)]

RESERVE PARA 7 (AUS)

[Support Bureau's text (FJI)]

Article 8. Preparedness monitoring and functional reviews

Article 8. [Prevention, (CAN)] Preparedness [and response (CAN)] monitoring and [functional reviews (~~DEL EM REGION, CHN~~)] [assessment (EM REGION, CHN)]

1. The Parties shall, building on existing and relevant tools, develop and implement an inclusive, transparent, effective and efficient pandemic prevention, preparedness and response monitoring and evaluation system.

[a1. Each Party shall, in accordance with national and regional laws as appropriate and in the light of national context, develop, regularly update and implement comprehensive inclusive multisectoral resourced national plans and strategies for pandemic prevention, preparedness and response and health system recovery (CHE, CAN)]

1. The [Conference of the (AUS, UK)] Parties [shall (~~DEL RUS, IND~~)] [endeavour to (EM Region, CHN)] [will (RUS, IND)] [implement (CHN)], [[building on [existing and (~~DEL EU~~)] relevant [tools, (~~DEL EU~~)] (~~DEL IND~~)] [and considering the ongoing work on the Universal Health and Preparedness Review (CHE) (~~DEL EGY, PAK, IRN, CHN, SYR, JAM, MYS, BGD, RUS, IND, NGA, CUB, IDN, EGY, BRA, UAE, BOL~~)] [including the IHR Monitoring and Evaluation Framework (USA, MEX, UK, MCO, JPN, CHL, FJI, UAE, CAN, QAT, CHE) (~~DEL PAK, RUS, IND, NGA, EGY, SYR, BGD~~)] [mechanisms, including under the IHR, (EU)] (~~DEL RUS, PAK, NGA, SYR~~)] [develop (~~DEL USA~~)] [refine (USA)] [and implement an inclusive, transparent, effective and efficient (~~DEL RUS, CHN, IND~~)] pandemic prevention, preparedness and response monitoring and evaluation [system (~~DEL RUS, CHN~~)] [[framework (CHN)] [complementary and non-duplicative to IHR reporting, to be adopted by WHA (RUS, UAE)], based on relevant tools and guidelines developed by WHO in partnership with relevant international organizations (CHN)].

[1bis. Each party will define according to its national context and laws the national coordinating authority to carry out the assessment. (MEX)]

[RETAIN Bureau's text: AF GROUP + EGY, MYS]

2. Each Party shall assess, every five years, with technical support from the WHO Secretariat upon request, the functioning and readiness of, and gaps in, its pandemic prevention, preparedness and response capacity, based on the relevant tools and guidelines developed by WHO in partnership with relevant organizations at international, regional and subregional levels.

2. [For that purpose (EU)] Each Party [shall take measures to periodically assess (CHN)] [taking into account its national context (AF GROUP + EGY, BGD)] [shall (~~DEL RUS, ROK~~)] [in line with its national context and priorities shall take measures to assess periodically (EM Region, UK)] [will conduct self-assessment (RUS)] [assess, (~~DEL RUS, ROK~~)] [at least (EU, NOR, AF GROUP + EGY, CHL, BGD, CAN, AUS, IND)] [every five years, (~~DEL EM Region, JPN, UK, ROK, CHN~~)] [if needed (RUS, ROK)] with technical

support from the WHO Secretariat [and/or other relevant regional organizations (KEN)] [and other mandated regional organizations (AF GROUP + EGY, BGD)] upon request, [of (RUS, ROK)] the functioning and readiness of, and gaps in, its pandemic prevention, preparedness and response capacity, [based on [the framework mentioned in paragraph 1 of this Article (RUS, ROK)] [the relevant tools and guidelines developed by WHO in partnership with relevant organizations at international, regional and subregional levels [including civil society and community-led groups (CAN)] [which are approved by Member States party to the agreement or the Conference of the Parties (AF GROUP + EGY, BGD)] [with the aim to guide technical cooperation to build and strengthen national capacities and capabilities (MEX, NOR)] [, and those which are agreed by the State Parties or approved by the Conference of the Parties (EM Region)] [and adopted by the Conference of the Parties (BGD, MYS, IND)]. (DEL RUS, ROK) (DEL CHN)]

[3. The Parties agree to establish a timeline for a Global Peer Review Mechanism to assess pandemic, prevention, preparedness and response capacities and gaps as well levels of readiness with the aim of promoting and supporting learning among Parties, best practices, actions and accountability at the national, regional and global levels to strengthen national health emergency preparedness and readiness capacities. (USA, AUS) (DEL IND, CHN, IRN, NGA, AF GROUP + EGY, BGD, MYS, UAE, BOL)]

[DEL ART 8 (move to Ch. 3): BRA, RUS, BGD, MEX, NOR, AUS, COL, URY]

[RETAIN ART 8 in current location: UAE]

Article 9. Research and development

Article 9. [Pandemic or pandemic-related (RUS)] Research and development

1. The Parties shall cooperate to build, strengthen and sustain national, regional and international capacities and institutions for research and development, particularly in developing countries, and shall promote scientific collaboration for the rapid sharing of information and access to research results and outcomes, including through open science approaches.

1. [The Parties shall [cooperate [in accordance to relevant law (QAT, UEA, SAU)] (DEL IND)] [within means and resources at their disposal (JPN)] [subject to available resources and in accordance with applicable law (USA, JPN)] to build, strengthen and sustain national, regional and international capacities and institutions for research and development, [in support of pandemic prevention, preparedness and response (CAN)] [particularly (DEL USA)] [including (USA)] in developing countries [RETAIN (GUA, COL, BGD, CUB, MYS, SYR)], [with particular attention to least developed countries (USA) (DEL PAK, CHN, DOM, AF GROUP + EGY, NGA, BGD, NAM, SYR)] and shall promote scientific collaboration for the rapid [sharing of [relevant (PHL, CUB, SYR, CUB, IDN)] information and (DEL AFR GROUP + EGY, BGD) (RETAIN USA)] access to research results and outcomes, [including through open science approaches (DEL RUS, PAK, IRN, IDN)] [, taking into consideration ethical research standards (PHL, CAN, SYR)].

[**RETAIN** Bureau's text (BRA, IDN, COL, ARG, MYS, BOL, FJI)]

2. To this end, the Parties shall promote:

2. To this end, the Parties shall (**DEL** BRA, CUB, BGD, SYR, IDN)] promote [, within their capabilities (JPN)] [in line with domestic laws, policies and capacities (EU, JPN) (**DEL** BRA, CHN, CUB, CUB, BGD, SYR, IDN)] [with a central role for WHO (CHN, IDN, IRN, BGD, SYR) (**DEL** USA, UEA)]: [**RETAIN** original text (COL, ARG, MYS)]

(a) sustained investment in research and development for public health priorities, including for pandemic-related products, and support for research institutions and networks that can rapidly adapt and respond to research and development needs in the event of a pandemic emergency;

(a) sustained investment in research and development for public health priorities, including for pandemic-related [health (USA, EU) (**DEL** USA)] products, and support for research institutions and networks that can rapidly adapt and respond to research and development needs in the event of a pandemic emergency;

(b) technology co-creation and joint venture initiatives that engage the participation of, and international collaboration among, scientists and/or research centres, particularly from developing countries, including from the public and, as appropriate, private sector;

(b) technology co-creation [, open innovation (PHL, BGD, FJI)] and joint venture initiatives that engage the participation of, and international collaboration among, scientists and[/or (**DEL** EU)] research centres, [particularly (**DEL** USA)] [including (USA) (**DEL** (IND))] from [developing countries (**RETAIN** (GUA, COL, BGD, CUB, MYS, SYR, BOL)), [with particular attention to least developed countries, and (USA) (**DEL** IND, CHN CUB, BGD, BRN, NAM, SYR)] [including from the public] [and, as appropriate, private sector (**DEL** RUS, PAK)] (DEL (IRN));

[**RETAIN** original Bureau's text (IND, BRA, SYR, BOL, CUB)]

(c) innovative research and development, including community-led and cross-sector collaboration, for addressing pathogens with pandemic potential;

(c) [innovative research and development, [including community-led (**DEL** RUS, CHN, PAK, IRN, EGY, SYR) (**RETAIN** NZL, AUS)] [which includes community participation (BRA, NZL, BRN, BOL, FJI)] and cross-sector collaboration, [for addressing (**DEL** PHL, BGD)] [relating to (PHL, BGD)] pathogens with pandemic potential; **RETAIN** Bureau's text (BRN, FJI)]

(d) equitable access to research knowledge, evidence synthesis, knowledge translation and evidence-based communication tools, strategies and partnerships, relating to pandemic prevention, preparedness and response;

(d) [[Equitable [and timely (IDN)] [and multilingual (CHN)] access to research knowledge (**DEL** CAN)], evidence synthesis, **RESERVE** (EU)] knowledge [and technology (IND)] translation and evidence-based communication tools, strategies and partnerships, relating to pandemic prevention, preparedness and response [while (SAU)]; **RETAIN** Bureau's text (BRA, BRN, BGD, BOL, FJI)

(e) capacity-building programmes, projects and partnerships, and substantial and sustained support for research and development, including basic and applied research, such as early-stage research, product discovery, pre-clinical and translational research;

(e) capacity-building programmes, projects and partnerships, and substantial and sustained support for research and development, including basic and applied research, such as early-stage research, product discovery, pre-clinical and translational research;

(f) international collaboration and coordination, including with the private sector, to set common objectives, research goals and priorities, to develop pandemic-related products for diverse populations and settings, with a central role for WHO;

(f) [regional and (EU)] [Non discriminative (RUS, CUB, SYR, IRN, CUB, SYR)] international collaboration and coordination, [including [through consultation (CAN)] with [relevant research bodies, institutions and partnerships and (UK, CAN, AUS, EU)] the private sector (**DEL** IRN, EGY)], [and other relevant stakeholders (EU)] to [set (**DEL** EU, CAN)] [identify (EU, CAN)] common objectives, research goals and priorities, [including (UK, CAN, AUS, EU)] [to develop (**DEL** EU)] [with the support of the Secretariat and with the view to pooling expertise avoiding duplication of research efforts and facilitating the development of (EU)] pandemic-related [health (USA, EU, TUR) (**DEL** UEA)] products [as appropriate (IND)] [for diverse populations and settings (**DEL** CHN, PAK, IRN, EGY, NGA, URY) (**RETAIN** (BRN, CAN, FJI), NOR) [a variety of populations and settings (BRN, NZL, UK)], [[with a [central (**DEL** USA, IND, QAT)] [convening (USA, QAT, CAN)] [facilitating (IND)] role for WHO] (**DEL** SAU)];

(g) access for scientists and researchers, particularly from developing countries, to relevant international scientific research programmes, projects and partnerships, including those referred to in this Article, as well as scientific publications;

(g) [access for (**DEL** PAK)] [and meaningful participation by (UK, PAK, CAN, AUS, EU, BRN) (**DEL** NGA)] scientists and researchers, [particularly (**DEL** USA)] [including (USA)] from [developing countries (**RETAIN** (GUA, COL, BGD, CUB, MYS, SYR, BOL)], [with particular attention to least developed countries (USA, EU)]

[~~BRA, PAK, CUB, GUA, BRN, NAM, SYR~~] [to (~~UK, AUS, EU, BRN~~)] [in (~~UK, PAK, AUS, EU, BRN~~)] relevant [international (~~EU~~)] scientific research programmes, projects and partnerships, [technology platforms (~~IND~~)] including those referred to in this Article, as well as [contribution [and access (~~BRA, PAK, BOL, FJI~~)] to (~~UK, PAK, EU, BRN~~)] scientific publications;

(h) the sharing of information on national research agendas, capacity-building activities, and research and development priorities during pandemic emergencies; and

(h) the sharing of [relevant (~~PHL, BOL, CUB, SYR, IDN~~)] information on [national (~~IND~~)] [relevant (~~IND~~)] research agendas [and priorities (~~CHAIR, BGD~~)], capacity-building activities, [and research and development priorities (~~CHN~~)] [and best practices on efficient and effective clinical trials (~~USA, UK~~) (~~BRA~~)] during pandemic emergencies [with the support of existing expert bodies (~~EU~~)]; and

(i) research on the causes and effects of pandemics, on their prevention and management, including: (i) the epidemiology of emerging diseases, factors driving disease spill-over or emergence, and behavioural science; (ii) public health and social interventions used to control pandemics and their effect on the spread of disease and the burden imposed by these measures on society, including its economic cost; and (iii) relevant health products, with the aim of promoting equitable access, including their timely availability, affordability and quality.

(i) [[research on the causes [, enabling factors (~~EU~~)] and effects of pandemics, on their prevention and management, [taking into account WHO guidance and blueprint (~~IDN~~)] including: (i) the epidemiology of emerging diseases, factors driving disease spill-over or emergence, and [social and (~~UK, EU, FJI~~)] behavioural science; (ii) public health and social [interventions (~~UK, EU, FJI~~)] [measures (~~UK, EU, FJI~~)] used to control pandemics and their effect on the spread of disease and the burden imposed by these measures on society, including its economic [cost (~~SAU~~)] [impact (~~SAU~~)]; and (iii) [relevant health products (~~USA, EU, UK~~)] [pandemic-related health products (~~USA, EU, TUR~~)], [with the aim of (~~USA, JPN, UK~~)] [including (~~USA, JPN~~)] promoting [fair, timely and (~~USA~~)] equitable access, [based on public health risks (~~JPN~~)] [including their timely availability, affordability [, safety (~~EU~~)] and quality (~~USA, UK~~) (~~IND~~)] RETAIN Bureau's text (~~BRA~~)].

3. The Parties shall, in accordance with national circumstances and mindful of relevant international standards, take steps to strengthen international coordination and collaboration to support well-designed and well-implemented clinical trials, by developing, strengthening and sustaining clinical trial capacities and research networks at the national, regional and international levels.

3. The Parties shall [subject to available resources and (USA)], in accordance with [their respective capacities and (AF GROUP + EGY, IND)] [national circumstances (~~DEL~~ USA) (~~RETAIN~~ UAE, QAT, IND)] [resources (BGD, TUN)] [and applicable [national (KEN)] law (QAT, USA, AUS, UAE, SAU)] and [mindful of (~~DEL~~ EU)] [considering (EU)] relevant [WHO (RUS)] [international (~~DEL~~ RUS)] [ethical Each Party shall develop national policies to: (AF GROUP + EGY, IND)] standards, [and ethical [research (PHL, KEN, UK, IDN, BTN)] standards (PHL, BRA, CAN, USA, TUN)] take steps [, including between pandemics (UK, USA)] to strengthen international coordination and collaboration to support well-designed and well-implemented clinical trials [that take into account [the standard protocols (NGA)] [representativeness of target populations (CAN, AUS) (~~DEL~~ AG + EGY)] [taking into account the standard protocols (AG + EGY)] (~~RESERVE~~ AF GROUP + EGY (~~DEL~~ EGY))], by developing, strengthening and sustaining clinical trial capacities and research networks at the national, regional and international levels [, access to safe, effective and quality assured products developed for the populations in which the research is carried out (MYS, IDN, BRA)] [promoting access to comparator products needed for clinical trials, to allow for rapid development and comparison of products and technologies (MYS, BGD)].

[3bis. Each Party shall, in accordance with national circumstances, [and in line with international medical ethical guidelines (EU, UK)] promote the conduct of well-designed and well-implemented clinical trials in their jurisdiction, taking into account recommendations and guidance developed by the WHO. (UK, CAN, USA, EU) (~~DEL~~ UGA)]

4. The Parties shall support new and existing mechanisms to facilitate the rapid reporting and interpretation of data from clinical trials, to develop or modify, as necessary, relevant clinical trial guidelines, including during a pandemic.

4. The Parties [shall [in accordance with applicable law (QAT, IND)] [promptly report clinical trial results and (BGD)] [promote (EU)] [support (~~DEL~~ EU)] [to the extent appropriate and in accordance with applicable law (USA, CAN, IND)] new and existing (~~DEL~~ SAU)] [the parties in accordance with applicable law shall support new and existing (SAU)] mechanisms to facilitate the rapid reporting and interpretation of data from clinical trials [while promoting trials that provide the highest protections to human subjects and meet relevant regulations and internationally harmonized standards (USA, CAN)], [to develop or modify, as necessary, relevant clinical [trial (~~DEL~~ UK)] [guidelines (~~DEL~~ EU)] [protocols (EU)] [and ethical research standards (PHL, BRA)], (~~DEL~~ USA, CAN)] including during a pandemic [emergency (USA, CAN, JPN)]. (~~DEL~~ RUS)] [and adjust, if needed, guidelines to the pandemic circumstances. (RUS) (~~DEL~~ USA)]

[4b. Early interaction with regulatory bodies for guidance on optimal trial design to facilitate an efficient regulatory process (EU)]

[4c. Access to, and the facilitation of, the use of comparator products needed for clinical trials in accordance with domestic law to allow for rapid development and comparison of products and technologies (EU)]

5. Each Party shall, in accordance with national law, support the transparent and public sharing of research inputs and outputs from research and development of government-funded pandemic-related products, including scientific publications with data shared and stored securely.

5. Each Party shall [subject to applicable law (USA, CAN)], [[in accordance with (DEL USA, CAN)] national [applicable (QAT)] law (DEL SAU)] [in accordance with applicable law (SAU)] [and principles of data protection (PHL)], support the transparent [, responsible (PHL)] and public sharing of [clinical trial protocols and results conducted either within the country or through partnership with other Parties and (BRA, BGD) (DEL USA)] research [inputs and (DEL USA, CAN, AUS, EU)] [outputs (DEL EU)] [results (EU)] from research and development of [government [publicly (AF GROUP + EGY)]-funded (DEL RUS)] pandemic-related [health (USA, CAN)] products, [including scientific publications [with data shared and stored securely (DEL PHL)] [and protection of shared and stored relevant data (PHL)] (DEL RUS)].

6. Each Party shall develop national policies to:

6. Each Party [shall (DEL EU)] [develop or strengthen (MWI)] [should in accordance with national law and policies (EU)] [develop national policies [to [(DEL USA, CAN, UK, AUS, CHE, JPN) (DEL BGD)] (RETAIN USA)] [regarding (USA, CAN, UK, CHE, JPN, AUS)]:

RETAIN Bureau's text (BRA, ECU, MEX, PRY, URY, CHL, BOL, CRI, ARG, COL, PER, NIC, DOM HON, PAN, SLV, GUA, BGD, CHN, MYS, IDN, PHL, PAK, PSE, SYR, FJI, ZAF, BTN, IND)

(a) include provisions in government-funded research and development agreements for the development of pandemic-related products that promote timely and equitable global access to such products during public health emergencies of international concern and pandemics. Such provisions may include: (i) licensing and/or sublicensing, preferably on a non-exclusive basis; (ii) affordable pricing policies; (iii) technology transfer on voluntary terms; (iv) publication of relevant information on research inputs and outputs; and/or (v) adherence to product allocation frameworks adopted by WHO; and

(a) [the inclusion of (USA, JPN)] [include (DEL USA, JPN)] provisions in government-funded research and development agreements [and in licensing of government-owned technology for such products (COL, AG + EGY)] for the development of pandemic-related [health (USA)] products [during PHEICs and pandemic emergencies (USA, JPN) (DEL BRN)] [that (DEL COL)] [and (COL)] promote[ing (COL)] [transparent, (PHL, IDN)] timely[, unhindered (IRN, PSE, NIC, VEN, CHN, BLR, SYR, CUB, TUN) (DEL USA, UK, CHE)] and equitable global access to such products [in preparation for and (COL, BRN)] [during public health emergencies of international concern[, humanitarian emergencies settings (PSE)] and pandemics (DEL USA)]. Such provisions [shall (BGD) (DEL USA)] [may (DEL AF GROUP + EGY, BGD)] [should (AF GROUP + EGY) include [but not limited to (AF GROUP + EGY)]: (i) licensing and/or sublicensing [through mechanism referred to in Article 11.2 (BGD)], preferably on a non-exclusive basis[; and in addition may include (BGD)]; (ii) [transparent and (PHL, BRA, BGD, IDN)] affordable pricing policies; (iii) technology transfer [and know-how

(BRA, AF GROUP + EGY) [including through mechanisms under Article 11 (AF GROUP + EGY)] on [voluntary (DEL AG + EGY)] [and mutually agreed (USA, CHE, JPN, CAN, AUS, NOR) (DEL BGD, IRN, AF GROUP + EGY)] terms; (iv) publication of relevant information on research inputs and outputs; and/or (v) [promoting (USA)] adherence to product allocation frameworks [adopted (DEL CHN, IRN)] [recommended (CHN, IRN, SYR)] by WHO; and[[/or (DEL AF GROUP + EGY)] (vi. Provisions securing rights by the funder to address inadequate performance or inability to abide by terms set to ensure affordable, equitable and timely development and access by the funding recipient (COL)]

[(a)alt. Include provisions to promote equitable access to pandemic-related health products in government-funded research and development agreements and in licensing of government-owned technology for such products (EU)]

(b) publish relevant terms of government-funded research and development agreements promoting equitable and timely access to such products during a pandemic emergency.

(b) [publish (DEL USA, AUS)] [the publication of (USA, AUS)] relevant terms of [government (DEL COL)] [public[ly (AF GROUP + EGY)] (COL)]-funded research and development agreements [for pandemic-related health products (EU)] [in licensing of government-owned technology for such products (COL)] [related to (JPN, AUS, CAN)] promoting equitable and timely [and unhindered (IRN, PSE, NIC, VEN, CHN, BLR, CUB, TUN, SYR) (DEL USA, UK, CHE, ISR)] access to such products [in preparation for and (COL, AF GROUP + EGY)] during a pandemic emergency [and humanitarian emergencies settings (PSE)] [as decided by each Member State (ISR)].

[6bis. The Global Research and Development Network shall be developed, coordinated and convened by WHO in partnership with the Parties and other relevant stakeholders and shall be guided by the principles of transparency, inclusivity, timeliness and consideration of public health needs. (IDN)]

QAT: Pandemic-related health products – universal change

[DEL PARA 6 (RUS)]

[RETAIN Bureau's text Para 6: CHL, BRA+, AF GROUP + EGY]

[RETAIN Bureau's all Art 9: ECU, MEX, NOR, URY, CHL, BOL, UGA, CHN, DOM]

Article 10. Sustainable and geographically diversified production

Article 10. Sustainable and geographically diversified [local (CHN)] production

1. The Parties commit to achieving a more equitable geographical distribution and scaling up of the global production of pandemic-related products, and increasing sustainable, timely, fair and equitable access to such products, as well as reducing the potential gap between supply and demand during pandemics.

1. The Parties [[commit (**DEL AF GROUP + EGY, BGD, COL, SYR, HND**)] to [work towards (EM Region, SAU)] [achieving (**DEL EM REGION, SAU**), CHE, UK] (**DEL USA, QAT, JPN**)] [shall achieve (AF GROUP + EGY, BGD, COL, SYR, MYS, HND)] [resolve to work toward (USA, QAT, UAE, JPN, CHE, UK, CAN)] [a more equitable geographical distribution and [rapid (CHN, PSE, BGD, BRA, SYR, FJI, THA)] scaling up of the global (**DEL EU**)] [economically sustainable and geographically diversified (EU)] production of pandemic-related [health (USA, EU, JPN, TUR, CAN, UK)] products [and other health products (BRA, SYR, GUA, COL)], and [thus (EU)] increasing [sustainable, (**DEL EU**)] timely, [unhindered, (IRN, PSE, SYR, NIC, VEN, BLR, CUB, RUS, CHN) (**DEL USA, UK, CHE, CAN**)] [fair (**DEL EU**)][, affordable (CHN, PHL, PSE, BGD, SYR, IDN, FJI, THA)] and equitable access to [safe, effective, quality and affordable pandemic-related (AF GROUP + EGY, BGD, BRA, COL, CHL, SYR, USA, IDN, MYS)] [such (**DEL AF GROUP + EGY, BGD, COL, SYR**)] products, [as well as reducing the potential gap between supply and demand (**DEL EU**)] [during pandemic[s (**DEL EU**)] (**DEL BRA, COL, IDN, GUA**)] [emergencies (EU, USA)] [and humanitarian emergency settings (PSE, SYR)].

[*alt.* The Parties commit to achieving economically sustainable and geographically diversified production of pandemic-related health products and thus increasing the timely and equitable access to such products during pandemic emergencies (EU)]

2. The Parties, in collaboration with WHO and other relevant organizations, shall:

2. The Parties [, in collaboration with WHO [and other relevant [international (IRN, SYR)] organizations (**DEL RUS**)] [as appropriate (UAE)] [in official relations with WHO (COL, BRA, GUA) (**DEL USA, ISR**)], (**DEL QAT**)] [as needed (USA, ISR, CAN)] [shall (**DEL USA**) (**RETAIN COL, BRA, GUA**)] [to the extent possible (CAN, AUS)] [intend to (USA, JPN)]: [**RETAIN** as original (MYS)]

(a) take measures, in cooperation with regional organizations, to provide support, maintain and strengthen production facilities at national and/or regional levels, particularly in developing countries, and to facilitate scaling up of production of pandemic-related products during emergencies, including through promoting and/or incentivizing public and private investment aimed at creating or expanding economically viable manufacturing facilities of relevant health products;

(a) take measures, in cooperation with [national (UK)] [subregional and (COL, BRA, GUA)] [regional [and international (UK, AUS)] organizations (**RESERVE RUS**)] [as appropriate (UK)], [where appropriate, (CHN, QAT, USA, SYR, EM REGION, SAU, JPN)] to provide support, maintain [and (**DEL BRA, GUA, COL**)] strengthen[, and sustain (BRA, BGD, FJI, GUA, COL)] production facilities at national and/or [subregional and (COL, GUA)] regional levels, particularly in developing countries, [for the supply of pandemic-related products during interpandemic and pandemic periods (BGD, IRN, IDN)] [and (**DEL USA**)] [in order to (USA)]

to facilitate [rapid (CHN, SYR, PSE, MYS)] scaling up of production [of pandemic-related [health (USA, JPN, TUR)] products (~~BRA, GUA, COL~~)] during emergencies [and humanitarian emergencies settings (PSE, SYR)], including through [promoting (~~ISR~~)] [recognizing the utility of (ISR)] and/or incentivizing public and private investment aimed at creating or expanding [and accelerated (CHN, SYR, PSE, MYS)] [economically viable (~~UGA~~)] manufacturing facilities of relevant [pandemic-related (USA)] health products;

[2(a)alt. Take measures in cooperation with regional organizations to promote public and private investment aimed at creating or expanding economically sustainable and geographically diversified production facilities of health products particularly in developing countries which are capable of scaling up production of pandemic-related health products during emergencies. (EU)]

(b) facilitate the continuous and sustainable operations of the facilities referred to in subparagraph 2(a) of this Article, including through promoting transparency of relevant unprotected information on pandemic-related products and raw materials across the value chain;

(b) facilitate the continuous and sustainable operations of the facilities referred to in subparagraph 2(a) of this Article[, by promoting [governmental, regional and international procurement and (BRA, GUA, COL)] sustainable local production ecosystem including sharing (CHN, BRA, PSE, BGD, FJI, MYS)], [including through promoting transparency of relevant [unprotected (~~ECU, IDN~~) (**RETAIN** UK, CAN, USA)] (~~CHN, BRA, BGD, MYS~~)] [undisclosed (COL, BRA, GUA) (~~USA~~)] information [and data (COL, BRA, FJI), GUA] on pandemic-related [health (USA, EU)] products and raw materials [including access (PHL)] across the value chain;

(c) facilitate the transfer of relevant technology, know-how, and licences pooled in relevant mechanisms (as referred to in Article 11), including during interpandemic times, to ensure the sustainability of the facilities referred to in subparagraph 2(a) of this Article;

(c) [Facilitate (~~AF GROUP + EGY, EU, IRN, FJI, PSE~~)] [promote the voluntary transfer on mutually agreed terms of (EU, UK) (~~ZAF~~)] [ensure (AF GROUP + EGY, IRN, FJI, PSE) the transfer of relevant technology, know-how, and licenses [that have been contributed to the (USA)] [pooled in relevant (~~USA~~) (**RETAIN** COL, BRA, MYS, GUA)] mechanisms [((~~USA~~)] as referred to in Article 11)] (~~USA~~) (DEL USA) on voluntary and mutually agreed terms (JPN, AUS, CHE) (~~ZAF~~)] [, as well as necessary materials (PHL, BGD, PSE, FJI)], including during interpandemic times [and humanitarian emergencies settings (PSE, SYR) (~~USA~~)], to ensure the sustainability of the facilities referred to in subparagraph 2(a) of this Article;

(d) take measures, and encourage international organizations, to establish long-term contracts and make investments, especially in developing countries' facilities preferably with a regional scope of operation, to ensure regular production of pandemic-related products produced by local and regional manufacturers;

(d) [take measures, and (DEL EU)] encourage international organizations [and other relevant organizations (UK)], to establish [arrangements, including appropriate (UK)] long-term contracts[, concessional financing access (ECU, BGD)] and make investments[, especially in developing countries' facilities [referred to under subparagraph 2(a) (BGD, NAM)] [preferably with a regional scope of operation, (DEL RUS)] to (DEL USA)] [to generate predictable demand for (USA)] [[ensure (DEL UK, CHE)] [support (CHE)] [facilitate (UK)] [regular (DEL UK)] [sustainable (UK)] production of (DEL USA)] [pandemic-related (DEL BRA, GUA, COL) (RETAIN USA)] [health (BRA, GUA, COL)] products[, especially those (USA)] produced by local and[/or (CHN)] regional manufacturers [in developing countries (USA)];

(e) facilitate and support authorization of pandemic-related products produced by the facilities referred to in subparagraph 2(a) of this Article; and

(e) [[promote capacity building aimed at obtaining timely (EU)] [[facilitate and support [regulatory (USA)] (DEL EU)] authorization (DEL NOR)] [under international standards and guidelines (JPN)] [provide regulatory support for (NOR, COL, FJI)] of [pandemic-related (DEL BRA, GUA, COL) (RETAIN USA)] [health (BRA, GUA, COL)] products produced by the facilities referred to in subparagraph 2(a) [based on the data submitted to national regulatory authorities and in accordance with relevant national law (CAN, AUS)] of this Article; and

DEL 2(e) (UK, ISR, CAN) RETAIN (KEN)]

[RETAIN Bureau's text for 2(e) (IND)]

(f) support and/or facilitate skills development, capacity-building and other initiatives for production facilities.

(f) support [and/ (DEL EU)] or facilitate skills development, capacity-building and other initiatives for production facilities [as well access to market including acceleration ... and other regulatory requirements (IDN)].

[(g). Encourage research and development institutes and manufacturers, in particular those receiving significant public financing, to waive or manage for a limited duration royalties on the use of their technology for the production of pandemic-related products. (AF GROUP + EGY, BGD, MYS) (DEL USA, UK, JPN)]

[(h).Promote the publication by private right holders of the terms of licensing agreements or technology transfer agreements for pandemic-related products. (AF GROUP + EGY, BGD, MYS) (DEL USA, UK, JPN)]

[(i). Take measures to overcome the intellectual property-related entry barriers to facilitate the production of pandemic-related products referred to under subparagraph 2(a) (BGD, PSE, IRN, SYR, MYS, FJI) (DEL USA, UK, JPN)]

3. Each Party shall promote public and private sector investments aimed at creating or expanding manufacturing facilities for pandemic-related products, especially regional manufacturers based in developing countries.

3. [[Each Party shall [endeavour to (JPN) (**DEL** BRA, IDN, BGD)] [promote (**DEL** ISR) (**RETAIN** BRA, SYR, IDN, BGD)] [recognizes the utility of (ISR)] public and[/or (MYS)] private sector [investments (**DEL** CAN) (**RETAIN** BRA, FJI)] [partnerships (CAN) (**DEL** BRA, FJI)] aimed at creating or expanding manufacturing [facilities (**DEL** NOR)] [capacities (NOR)] for pandemic-related [health (USA, JPN)] products, especially [subregional and (COL, BRA, GUA, MWI, FJI)] [local, and/or (CHN, BGD, SYR, MWI, FJI)] regional manufacturers based in developing countries.

DEL Para 3 (EU)]

[4. The WHO Secretariat shall provide technical assistance, upon request, to the manufacturing facilities under subparagraph 2(a) for its effective functioning (BGD, PSE, CHN, SYR, ZAF, IRN, IDN, FJI)]

Article 11. Transfer of technology and know-how

1. In order to enable sufficient, sustainable and geographically-diversified production of pandemic -related products each Party, taking into account its national circumstances, shall:

1. In order to [enable (**DEL** AF GROUP + EGY, PSE, SYR, IRN)] [in order to ensure (AF GROUP + EGY, PSE, SYR, IRN)] sufficient, sustainable and geographically-diversified production of pandemic -related [health (EU, JPN, TUR, UK)] products each Party [for the attainment of the objectives of this instrument (COL, BRA, GTM, SLV, MEX, PSE, CRI, DOM, IDN, FJI, SYR, NGA, PRY, BOL)] [taking into account its national circumstances (**DEL** COL, BRA, GTM, SLV, ARG, MEX, CRI, DOM, IDN, FJI, HND)], shall [enhance cooperation through facilitating the following measures on voluntary and mutually agreed terms (JPN, CHE, ISR, CAN) (**DEL** PAK, IDN, NAM, BGD, SYR, ZAF, FJI, MYS, IRN, NGA, AF GROUP + EGY)]:

(a) promote and otherwise facilitate or incentivize the transfer of technology and know-how for both pandemic-related and routine health products, including through the use of licensing and collaboration with regional or global technology transfer partnerships and initiatives, and in particular for the benefit of developing countries and for technologies that have received public funding for their development;

(a) promote [and otherwise facilitate or incentivize (**DEL** EU) (**RETAIN** KEN)] the [voluntary (EU, CHE) (**DEL** NGA, IRN)] transfer of technology and know-how for [both (**DEL** USA, CAN, ROK, AUS)] pandemic-related [[and routine (**DEL** USA, CAN, ROK, QAT, AUS, ISR, IND, JPN)] health products], [on voluntary and mutually agreed terms, (USA, CAN, ROK, AUS, UK, ISR, JPN, CHE, EU) (**DEL** NGA, IRN, FJI, SYR)] including through the use of [worldwide, transparent and non-exclusive (COL, BRA, GTM, SLV, MEX, CRI, FJI, CHN, PHL, IDN, HON)] licensing and collaboration with regional or global technology transfer partnerships and initiatives

[including those coordinated by the WHO (MYS, COL)], and in particular for the benefit of developing countries [at all times (PSE, TUN, NGA, SYR)] and for technologies that have received public funding for their [research and (COL, BRA, GTM, SLV, MEX, CRI, CHN, FIJ, HON)] development;

(b) promote the timely publication by private rights holders of the terms of licensing agreements and/or technology transfer agreements for pandemic-related products, in accordance with national laws;

(b) promote the [timely (~~DEL EU~~) (**RETAIN** NGA, IRN)] publication by [public or (COL, BRA, GTM, SLV, MEX, CRI)] private rights holders of the terms of [voluntary (EU, CHE) (~~DEL~~ NGA, IRN)] licensing agreements and/or technology transfer agreements for pandemic-related [health (USA, EU, TUR, QAT, UK, ISR)] products, in accordance with [national (~~DEL EU~~)] [domestic (EU)] laws [and policy (EU)];

(c) make available licenses, on a non-exclusive, worldwide and transparent basis and for the benefit of developing countries, for government-owned pandemic-related products, and shall publish the terms of these licenses at the earliest reasonable opportunity and in accordance with national laws; and

(c) [during pandemic emergencies, (USA, NZL, ISR) (~~DEL~~ NGA, IRN)] [make available licenses (~~DEL~~ EU, CHE, UK)] [promote the voluntary licensing (EU, CHE, UK, ISR, CHE) (~~DEL~~ NGA, IRN, FIJ)], on a [non-exclusive, [worldwide (~~DEL~~ EU, UK) (**RETAIN** NGA, IRN)] and transparent (~~DEL~~ UK) (**RETAIN** NGA, IRN)] basis [and for the benefit [of manufacturers and (BGD, PSE, NGA, SYR)] of developing countries (~~DEL~~ USA)], [for (~~DEL~~ EU, UK)] [where the party is the owner of all the rights in (a) (EU, UK)] [government-owned (~~DEL~~ EU, UK)] pandemic-related [products (~~DEL~~ USA, JPN, NZL)] [pandemic related technologies for which licenses could be made available (PAK, PSE)] [technologies (USA, JPN, NZL, ISR)], and [[shall (~~DEL~~ USA, NZL, ISR)] publish (~~DEL~~ EU, UK)] [the publication of (EU)] the terms of these licenses at the earliest reasonable opportunity and in accordance with [national (~~DEL~~ EU, UK)] [domestic (EU, UK)] laws [and policies (EU, UK)]; and

(d) provide, within its capabilities, support for capacity-building for the transfer of technology and know-how for pandemic-related products.

(d) provide, within its capabilities [and subject to available resources and applicable law (USA, ISR)], support for capacity-building for the [voluntary (EU, CHE)] transfer [on mutually agreed terms (EU)] of technology and know-how for pandemic-related [health (USA, TUR, QAT, ISR)] products [particularly to developing countries (COL, BRA, GTM, SLV, TUN, MEX, CRI, NGA, PHL, SYR, MYS)] [on voluntary and mutually agreed terms (USA, CAN, EU, AUS, ISR, CHE) (~~DEL~~ NGA, IRN, FIJ, SYR)].

[(e) Make available the regulatory dossiers of the government-funded pandemic-related products to WHO for further sharing of the same with regulatory agencies and production facilities mentioned under subparagraph 2(a) of Article 10 (BGD, PSE, NAM, FJI, MYS)]

[**SUPPORT** Bureau text for Para 1: IND]

2. The Parties shall develop and strengthen, as appropriate, mechanisms coordinated by WHO with the participation of other relevant technology transfer mechanisms as well as other relevant organizations, to promote and facilitate the transfer of technology and know-how for pandemic-related products to geographically diverse research and development institutes and manufacturers, particularly in developing countries, through the pooling of knowledge, intellectual property, know-how and data to all developing countries.

2. The Parties [hereby establish and (BGD, MEX, PSE, MYS)] shall develop and strengthen, as appropriate, mechanisms [that facilitate the transfer of technology and know-how for pandemic related health products on voluntary and mutually agreed terms. Such mechanisms may be (USA, QAT, JPN)] coordinated by WHO [and partnerships with other United Nations entities and relevant international organizations to promote synergies, complementarities, and coherencies, (PSE, TUN, IRN, SYR)] [in conjunction (USA, QAT)] with [the participation of (~~USA, QAT~~)] other relevant technology transfer mechanisms [and (USA, QAT)] [as well as (~~USA, QAT~~)] [with the participation of (USA)] other relevant organizations, [to promote and facilitate [voluntary (UK, CHE, CAN, QAT)] the transfer of technology and know-how [on mutually agreed terms (UK, JPN, CHE, CAN, QAT)] for pandemic-related products to geographically diverse research and development institutes and manufacturers, particularly in developing countries, [including through transfer hubs and technology pools (CAN, BRA)] [[referred to under Art 10.2a (BGD, PSE)] through (~~USA, QAT~~) (**RETAIN TUN**)] [and may include (USA, QAT, JPN)] the pooling of knowledge, [on a non-exclusive worldwide and transparent licensing of (COL, BRA, TUN, GTM, SLV, MEX, CHN, IRN, IDN, PHL, CHL, BGD, PSE, SYR, MYS, CUB, FJI, QAT, ECU, VEN), HND] intellectual property, know-how and data [to all [especially to (COL, BRA, TUN, GTM, SLV, MEX, PHL, MWI, IRN, CHL, PSE, SYR, CHN, CUB, FJI, BGD, QAT, ECU, VEN, HND)] developing countries [(~~USA~~) (**RETAIN BRA, CUB, NIC**)] [at all times (PSE, SYR, TUN, CUB, NIC)]] (~~CAN~~).

[*Alt 2:* The Parties shall develop and strengthen as appropriate, mechanisms for the voluntary pooling of knowledge, intellectual property, know-how and data aimed to promote the voluntary transfer of technology and on mutually agreed terms of technology and know-how for pandemic-related health products to geographically diverse research and development institutes and manufacturers, particularly in developing countries (EU).]

RETAIN Bureau's text: MYS, AG + EGY, IND, FJI

3. During pandemics, in addition to the undertakings in paragraph 1 of this Article, each Party shall:

3. During pandemics, in addition to the undertakings in paragraph 1 of this Article, each Party shall:

(a) encourage holders of relevant patents regarding pandemic-related products, in particular those who received public funding, to forgo or otherwise charge reasonable royalties to developing country manufacturers for the use, during the pandemic, of their technology and know-how for the production of pandemic-related products; and

(a) encourage holders of relevant patents [regarding **(DEL EU)** (for **(EU)**) pandemic-related [health **(USA, EU)**] products, in [particular **(DEL EU)** (including **(EU)**)] those who received public funding, to [, on voluntary and mutually agreed terms, **(USA, JPN, AUS)**] [forgo [royalties **(EU)**] or otherwise **(DEL JPN, CAN)**] [charge **(DEL EU)** (licensed any relevant patent **(EU)**)] reasonable royalties to developing country manufacturers for the use, during the pandemic, of their technology and know-how for the production of pandemic-related [health **(USA, EU)**] products [;with the aim to increase the availability and affordability of such products to Parties in need; **(EU)**] [and **(DEL EU)**]

(b) consider supporting, within the framework of relevant institutions, time-bound waivers of intellectual property rights to accelerate or scale up the manufacturing of pandemic related- products to the extent necessary to increase the availability and adequacy of affordable pandemic related- products.

(b) [[in the case that the intellectual property rights are deemed a barrier to access, take appropriate measures to support **(BRA, COL, GTM, SLV, FJI AG + EGY, TUN, IDN, NIC, MYS, IRN)**] [[consider **(DEL CHN, BGD, AG + EGY, IDN, IRN, VEN)**] supporting **(DEL BRA, FJI, AG + EGY, IDN, TUN, IRN)**], within the framework of relevant institutions, [time-bound waivers of **(DEL ROK)** (**RETAIN BGD**)] [compulsory licensing of TRIPS Agreement **(ROK)**] intellectual property rights [, technology transfer and know-how to the manufacturers with technology capability and capacity **(CHN, BGD, AG + EGY, IDN, TUN, CUB, SYR, IRN, VEN)**] to accelerate or scale up the manufacturing of pandemic -related products to the extent necessary to increase the availability and adequacy of affordable pandemic -related products. **(DEL USA, EU, CHE, CAN, UK, JPN)**]

[c. compel manufacturers within its jurisdictions to share undisclosed information, as defined in art 39.2 of the TRIPS agreement, with qualified third-party manufacturers where such information prevents or hinders urgent manufacture by such qualified third parties of a pharmaceutical product that is necessary to respond to a pandemic. **(COL, BRA, SLV, GTM, AG + EGY, NIC, IDN, VEN, ARG)** **(DEL EU, JPN, UK, AUS, USA)**]

RETAIN Bureau's text: **AG + EGY, IND**

4. The Parties that are WTO Members recognize that they have the right to use to the full, the flexibilities inherent in the TRIPS Agreement as reiterated in the Doha Declaration on the TRIPS Agreement and Public Health of 2001, which provide flexibility to protect public health including in future pandemics, and shall fully respect the use thereof by others.

4. The Parties [who are members of the (PSE, SYR, TUN)] [that are (~~DEL~~ PSE, SYR, TUN)] WTO Members [reaffirm (BGD, BRA, NIC, PAK, SYR, AG + EGY, COL, SLV, GTM, MYS, FJI, NGA, JPN) [recognize (~~DEL~~ BGD, BRA, NIC, NAM, PAK, SYR, AG + EGY, FJI, NGA, JPN)] that they have the right to use to the full[-est extent (MYS, BGD)], the [[flexibilities [inherent (~~DEL~~ CAN)] in the (RETAIN MYS, BGD)] (~~DEL~~ USA, NZL, JPN) [WTO (USA, NZL, JPN)]] TRIPS Agreement [including those (MYS, BGD)] [as [reiterated (~~DEL~~ BGD, NIC, NAM, IDN, FJI) reaffirmed (BGD, NIC, NAM, IDN, FJI)] (~~DEL~~ BRA, COL, GTM, SLV, TUN, FJI)] in (~~DEL~~ USA, NZL, JPN) [and (USA, NZL, JPN)]] the Doha Declaration on the TRIPS Agreement and Public Health of 2001, which provide flexibility to [take measures to (PAK, SYR)] protect public health including in future pandemics, [and shall fully respect the use thereof by others (~~DEL~~ USA, EU, UK, QAT, CHE, NZL)].

[4bis. The Parties shall not challenge, or otherwise exercise any direct or indirect pressure on the Parties that undermine the right of WTO Members to use TRIPS flexibilities at any multilateral, regional, bilateral, judicial or diplomatic forum. (BRA, COL, GTM, SLV, NIC, TUN, ARG, AG + EGY, BGD, FJI, PHL, PAK, IDN) (~~DEL~~ EU, JPN, USA, UK, NZL, ROK, CAN, CHE)]

[4alt. Nothing in the TRIPS Agreement, the Doha Declaration on the TRIPS Agreement and public health of 2001 and subsequent relevant decisions, which provide flexibility to protect public health including in future pandemics, shall be construed as preventing the WTO Members from taking measures to protect public health and to promote equitable and universal access to health products under this Agreement. (IRN, SYR, PSE, TUN, CHN, BLR, FJI, PAK) (~~DEL~~ EU, USA, CAN, CHE)]

RETAIN Bureau's text: RUS, IND

5. Each Party shall, as necessary and appropriate, review and update its national legislation in order to ensure the implementation of such flexibilities referred to in paragraph 4 of this Article in a timely and effective manner.

5. [Each Party [that is a Member of the WTO (PSE, IRN)] [shall (~~DEL~~ CHE, AUS) may (CHE)] [will endeavor to (AUS)], [review and consider amending (USA)] as necessary and appropriate, [review [and update (~~DEL~~ USA)] (~~DEL~~ EU, CHE)] its [national (~~DEL~~ EU) domestic (EU)] legislation [in order (~~DEL~~ USA)] to [ensure (~~DEL~~ EU, CHE) enable (EU, CHE)] [it is able to implement (USA)] [the implementation of such flexibilities [for the protection of public health (MYS, BGD, TUN)] referred to in paragraph 4 of (~~DEL~~ USA) (**RETAIN** TUN)] this Article in a timely and effective manner [including ensuring adequate exceptions and limitations in their intellectual property laws and regulations to facilitate the manufacture, export and import of the health products needed during health emergencies (BGD, TUN, SYR)] (~~DEL~~ CAN)].

RETAIN Bureau's text: RUS, BRA, NIC, IND, FJI, TUR

6. The WHO Secretariat shall work towards the improvement of access to pandemic-related products, especially during pandemic emergencies, through transfer of technology and know-how, including through cooperation with relevant international organizations.

6. The [WHO (~~EU~~)] Secretariat [, in cooperation with relevant international and regional organizations and other stakeholders, (EU)] shall work towards [supporting (EU)] the [implementation of the provisions of this article (EU)] [improvement of access to pandemic-related products, especially during pandemic [emergencies (~~AG + EGY~~)], [and humanitarian emergencies settings (PSE, IRN)] through [mechanisms for the (COL, FJI, BRA, GTM, SLV, IRN)] [promoting the (JPN)] transfer of technology and know-how [on voluntary and mutually agreed terms (JPN, CAN, CHE)], [at all times (PSE, SYR, IRN)] including [in (COL, FJI, BRA, GTM, SLV, IRN)] [through (~~COL, FJI, BRA, GTM, SLV, IRN~~)] cooperation with relevant international organizations (~~EU~~)]. [In this regard, the WHO Secretariat shall:

a) maintain a database of pandemic related products containing information on their specifications, manufacturing process, design etc and provide access to manufacturing facilities under Article 10.2(a) as well as other manufacturers on the condition of supplying at affordable price.

b) establish a biobank to create a repository of relevant biomaterials required for the production of pandemic related products. (BGD, PSE) (~~USA~~)]

[*alt.* The WHO Secretariat, in collaboration with relevant international organizations, including the WTO and the WIPO, shall work to address issues related to improving access to pandemic related health products during pandemic emergencies (USA, UK, AUS, CHE, NZL, CAN).]

RETAIN Bureau's text for para 6: TUN, RUS, IND

[7. A transfer of technology committee is hereby established. The Committee shall develop and adopt guidelines on the identification of technologies and know-how necessary to attain the objectives of this Agreement. (COL, BRA, GTM, SLV, PER)]

Article 12. Access and benefit sharing

1. The Parties hereby establish a multilateral system for access and benefit sharing for pathogens with pandemic potential: the WHO Pathogen Access and Benefit-Sharing System (PABS System).

1. [Without prejudice to their biological safety and to their economies (RUS)] The Parties[, recognizing Member States' sovereign rights over their biological materials and resources (CHN, IDN, SYR, MYS, AF GROUP + EGY, IRN, BGD, MCO, PHL, PAK, UAE, BOL, QAT)] [hereby (~~UK, CAN~~)] [agree to (UK, CAN)] [recognize the need to agree upon and (RUS)] establish [as part of a separate negotiation process (RUS)] a [transparent and equitable (MYS, SYR, BGD)] multilateral system for access and benefit sharing for

[pathogens with pandemic potential: **(RESERVE USA)**] the WHO Pathogen Access and Benefit-Sharing System (PABS System).

[**SUPPORT** Bureau's text: BRA, FJI, AF GROUP + EGY, COL, IDN, GTM, IND, BGD, URY, MYS]

2. The PABS System aims to ensure rapid, systematic and timely access to biological materials of pathogens with pandemic potential and the genetic sequence data (GSD) for such pathogens, which contributes to strengthened global surveillance and risk assessment, and facilitates research, innovation and development of health products; and on an equal footing, equitable, fair and rapid sharing of monetary and non-monetary benefits, including timely, effective and predictable access to relevant diagnostics, therapeutics or vaccines, based on public health risks, needs and demand, contributing to the rapid and timely control of public health emergencies of international concern and pandemics.

2. The PABS System aims to ensure rapid, systematic and timely access to [pandemic preparedness (RUS)] biological materials of [pathogens with pandemic potential **(RESERVE USA, EU)**] and the [related (RUS)] genetic sequence data (GSD) for such pathogens [, as appropriate (AF GROUP + EGY, BD, SYR)], [which [contributes to **(DEL USA)**] [yields inherent benefits such as (USA)] strengthened global surveillance and risk assessment, and [facilitates **(DEL USA)**] research, innovation and development of health products [it also provides for strict compliance with applicable national and international export control requirements for pathogens with pandemic potential to ensure the safe international distribution such materials (RUS)]; [and on an equal footing, equitable, [and (USA)] fair [and rapid **(DEL USA)**] sharing of monetary and non-monetary benefits [, that arise from the utilization of such biological materials and genetic sequence data, (AF GROUP + EGY, BGD, SYR)], including timely, [effective **(DEL AF GROUP + EGY, BGD, SYR)**] and predictable access to [safe and effective (AF GROUP + EGY, BGD, SYR)] relevant diagnostics, therapeutics or vaccines, based on public health risks, needs and demand, **(DEL RUS)**] [precluding their dual use as set forth in the BWC Convention, and (RUS)] [contributing to the rapid and timely control of public health emergencies of international concern and pandemic[s **(DEL USA)**] [and during humanitarian emergencies settings (PSE, SYR)] [emergencies (USA)] **(DEL BRA)**].

3. When a Party has access to a pathogen with pandemic potential, it shall, using applicable biosafety, biosecurity and data protection standards:

3. When a Party has access to a pathogen with pandemic potential [identified from within its territory (AF GROUP + EGY, BGD, SYR)], it shall, [taking into account national risk assessment (MYS, CHN, BGD)] [subject to (UK, USA, ISR, AUS, CAN, CHE)] [using **(DEL UK, ISR)**] applicable [laws, regulations and standards, including related to (USA, AUS, CAN, CHE)] [national and international laws, standards and guidelines (UK, ISR)] [[bio **(DEL USA, EU)**] safety, [bio **(DEL USA, EU, CHE)**] security and data protection [standards **(DEL USA, AUS, CAN, EU, CHE)**] **(DEL UK, ISR)**] [as far as permitted by its national laws and in accordance with international laws (JPN)]:

- (a) share with WHO any pathogen sequence information as soon as it is available to the Party;

[(a) share with WHO any [pathogen sequence information (DEL AF GROUP + EGY, BGD, SYR)] [public health information (AF GROUP + EGY, BGD, SYR)] as soon as it is available to the Party;

DEL (a) (USA, EU, CHE)]

[In relation to biological material, Parties should notify the PABS platform in established accordance with paragraph 10bis, below, through authorized national laboratories and obtain a PABS electronic label prior to providing the materials to one or more laboratories participating in WHO coordinated laboratory networks (CLNS). (BRA, FJI, BGD) (**DEL** EU)]

[All users of biological materials shall register at the PABS platform and shall accept legal obligations under PABS, including for benefit sharing in accordance with the PABS terms and conditions to be upon by the PABS Conference of the Parties before they receive biological materials from the CLNs. (BRA, FJI, BGD) (**DEL** EU)]

- (b) as soon as biological materials are available to the Party, provide the materials to one or more laboratories and/or biorepositories participating in WHO-coordinated laboratory networks (CLNs), which meet the legally binding terms of reference, as referenced below, with an electronic label of “PABS biological material” which will follow through to the end products and/or publications, and shall notify users of biological materials of the benefit-sharing provisions under the PABS System, recognizing that each Party may also share such biological materials to entities outside the CLNs. All users of biological materials shall have legal obligations under PABS regarding benefit sharing; and

(b) as soon as [practicable after (USA, UK, CHE)] [PABS (AF GROUP + EGY, BGD, SYR)] biological materials are available to the Party, provide the materials to one or more laboratories and/or biorepositories participating in WHO-coordinated laboratory networks (CLNs), [which meet the legally binding terms of reference, as referenced below, with an electronic label of “PABS biological material” which will follow through to the end products and/or publications, and shall notify [the material provider the receiver of the biological material (CHN)] users of biological materials [who shall be bound by the same terms and conditions as those in the PABS contracts (AF GROUP + EGY, BGD, SYR)] of the benefit-sharing provisions under the PABS System, (**DEL** USA, SAU, EU, CHE) (**RESERVE** UK)] [recognizing that each Party may also share such biological materials to entities outside the CLNs. (**DEL** AF GROUP + EGY, BGD, SYR) (**RETAIN** USA, CHE) (**RESERVE** IND)] [Each Party shall take appropriate measures to ensure that (JPN)] [All users of biological materials [shall have legal obligations under (**DEL** JPN, QAT)] [comply with this (JPN)] PABS regarding benefit sharing (**DEL** USA, AUS, CAN, ISR, EU, CHE) (**RESERVE** UK)]; and

[(b)*bis*. In relation to digital sequence information, notify the PABS platform established in accordance with paragraph 10*bis* below and obtain a PABS electronic label prior to providing the digital sequence information to one or more PABS sequence databases (SDBs) through the PABS platform. All users of DSI shall register at the PABS platform

and accept legal obligations under PABS including benefit sharing in accordance with the PABS terms and conditions, to be agreed upon by the Conference of the Parties before accessing DSI from SDBs through the PABS platform. (BRA, FJI, BGD) (~~EU~~)

(c) as soon as pathogen GSD is available to the Party, upload the GSD and relevant metadata to one or more PABS sequence databases (SDBs) which meet the legally binding terms of reference, as referenced below, an electronic label of “PABS GSD” which will follow through to the end products and/or publications, and shall notify the users of GSD of the benefit-sharing provisions under the PABS System, recognizing that each Party may also share such GSD outside the SDBs. All users of GSD shall have legal obligations under PABS regarding benefit-sharing.

[(c) as soon as [practicable after (USA, UK, EU, ISR, CHE)] pathogen GSD is available to the Party, upload [, subject to standard terms and conditions contained in the data/database click wrap agreement (AF GROUP + EGY, BGD, SYR)] the GSD and relevant metadata to one or more [PABS (~~USA, EU, ISR, CHE~~)] [publicly-accessible (USA, EU, ISR, CHE)] sequence databases (SDBs) [[which meet the legally binding terms of reference, as referenced below, [an electronic label of “PABS GSD” which will follow through to the end products and/or publications, and shall notify the users of GSD [, who will be bound by the same terms and conditions data/database data access agreement (AF GROUP + EGY, BGD, SYR)] of the benefit-sharing provisions under the PABS System, (~~USA, ISR~~) (**RESERVE UK**)] [recognizing that each Party may also share such GSD outside the SDBs. (**RESERVE IND**)] (~~AF GROUP + EGY, BGD, SYR~~) (**RETAIN USA, ISR, CHE**)] [All users of GSD [shall have legal obligations (~~QAT~~)] under PABS regarding benefit-sharing. (**RESERVE JPN, UK**)] (~~USA, AUS, CAN, ISR, CHE~~) (**RESERVE UK**)]

DEL PARA 3 RUS)

[3alt. The structure and operation modalities of the PABS System shall be approved by the Conference of the Parties [Governing Body to be established yet] at its first meeting. (RUS)]

[4. The Conference of the Parties [Governing Body to be established yet] shall regularly review the operation, monitor adherence and effectiveness of the PABS System and shall take the decisions necessary to promote and support its effective and sustainable implementation. (RUS)]

[**REPLACE** “shall” with “should” throughout paragraph 3 (PAK)]

4. The Parties consent to the further transfer and use of biological materials and GSD provided to the CLNs and SDBs, with an electronic label of “PABS biological material” or “PABS GSD”, in accordance with the provisions of this Article including on benefit sharing, as well as applicable biosafety, biosecurity and data protection standards. Parties agree that intellectual property rights may not be sought on such materials and GSD.

4. [The Parties consent to the [further (**DEL IND**)] transfer [and use of [covered (USA)] biological materials [and GSD (**DEL USA**)] provided to the CLNs [and further use of covered GSD provided to publicly accessible [and accountable (AF GROUP + EGY)] SDBs (USA)] [and SDBs, [to registered PABS individual and institutional users registered, with the PABS platform, and which have agreed to the PABS terms and conditions (BRA, COL, FJI, IDN, GTM) (**DEL EU**)] with an electronic label of “PABS biological material” or “PABS GSD”, (**RESERVE IND**)] [and notify PABS the receiver, (CHN)] (**DEL USA**)] in accordance with the provisions of this Article including on benefit sharing, [as well as (**DEL USA**)] [and subject to (USA, CAN, AUS, UK)] applicable [national and international laws, standards and guidelines (UK)] [laws, regulations and standards, including related to (USA, CAN, AUS)] [bio (**DEL USA, CAN**)]safety, [bio (**DEL USA, CAN**)]security and data protection [standards (**DEL USA, AUS**)]. (**RESERVE JPN**)] [Parties agree that [they will not seek (UK)] [intellectual property rights [may (DEL BRA, FJI, IDN)]][shall (BRA, COL, FJI, IDN GTM)] not be sought on [such (**DEL USA, CAN, JPN**)] [unmodified (USA, CAN, AUS, UK, JPN, ISR)] materials and GSD (DEL AF GROUP + EGY)] (**RESERVE EU**)] [users shall not claim any intellectual property or other rights that limit the access or use of the biological materials shared, their genetic parts or components, including genetic sequence data (AF GROUP + EGY) (**DEL CHE**)] [as such provided to the CLNs and SDBs (JPN)] [shared through the system (USA, CAN, AUS)] [or parts thereof (BRA, COL, FJI, IDN GTM)]. [Modified biological materials and GSD that have undergone innovation may be the subject of intellectual property rights provided that the criteria relating to such rights in the relevant jurisdiction are met. (JPN) (**RESERVE IND**)] [Parties agree that recipients of PABS Biological Material and GSD shall not seek or assert intellectual property rights on the biological materials related to GSD or parts thereof in any form including modified form and for any use. (MYS, BGD) (**DEL USA**)]

[4bis. The transfer obligations in paragraphs 3 and 4 of this Article do not apply to pathogens for which a specific regime has been endorsed by the World Health Assembly, particularly regarding the international storage and control of pathogen samples. (USA)]

5. The Parties agree that WHO shall develop, in accordance with the relevant templates to be developed by the Parties, as referenced in paragraph 11 of this Article, as well as consistent with the WHO regulations for study, scientific groups, collaborating institutions and other mechanisms of collaboration, legally binding terms of reference for the CLNs and SDBs with arrangements to notify the users of biological materials and GSD of the benefit-sharing provisions of the PABS system.

5. The Parties agree that WHO shall [develop] [enter into legally binding agreements with laboratories participating in the CLNs and SDBs (BRA, FJI, IDN, AF GROUP + EGY) (**DEL EU**)], in accordance with the [PABS terms and conditions to be agreed upon by the Conference of the Parties (BRA, FJI, IDN, AF GROUP + EGY) (**DEL EU**)] [relevant templates to be developed by the Parties, [in consultation with relevant stakeholders (USA, CAN)] [as referenced in paragraph 11 of this Article, (**DEL AF GROUP + EGY**)] (**DEL BRA, FJI, IDN, AF GROUP + EGY**)] as well as consistent with the WHO regulations for study, scientific groups, collaborating institutions and other mechanisms of collaboration, [[legally binding (**DEL USA, CAN, QAT, SAU, UK, UAE**)] terms of reference for the CLNs [and SDBs [with arrangements to notify the users of biological materials and GSD of the benefit-sharing

provisions of the PABS system. (~~USA, CAN~~) (~~RESERVE JPN~~) (~~BRA, FJI, IDN, AF GROUP + EGY~~)

6. WHO shall conclude legally binding standard PABS contracts with manufacturers to provide the following, taking into account the size, nature and capacities of the manufacturer:

[6. CLNs and SDBs, at the time of sharing biological materials or providing access to GSD, shall ensure that WHO have concluded legally binding PABS contracts with [the relevant manufacturers or entities that are registered users under the PABS platform, based on the terms and conditions that will include the obligation to provide the following non-monetary benefits: (a) to provide free of charge 20% of real-time production of relevant pandemic related products produced by the manufacturer during PHEICs or pandemics, to made available through the network established under Article 13 for distribution on the basis of public health risks and needs, (b) supply vaccines, therapeutics, diagnostics and other health products at affordable prices to developing countries, and to comply with WHO's allocation plan if such a plan is recommended by WHO during PHEICs or pandemics, (c) grant WHO during PHEICs and pandemics royalty-free, non-exclusive licenses on standard terms and conditions to use its intellectual property and other protected technology and know-how used in the . . . (BRA, IDN, FJI, BGD) (~~EU~~)] users to biological materials and GSD that shall include the following benefit sharing obligations (AF GROUP + EGY)] WHO shall conclude legally binding standard PABS contracts with manufacturers [of vaccines, diagnostics and therapeutics against covered pathogens (USA, UK, QAT, EU)] to provide [at least two of (USA, UK, EU)] the following [on terms that (USA, EU)], tak[e (USA, QAT)] [ing (~~USA, QAT~~)] into account the size, nature [and (~~CHN, SYR~~)] [production (USA, QAT, EU)] capacities [, and market share (CHN, SYR)] of the manufacturer[s portfolio on covered pathogens (USA, EU)]:

[6bis. The parties agree that any entity, including relevant manufacturers or entities mentioned in paragraph 6, using or benefiting from the PABS system using . . . shall make a minimum annual basis monetary contribution whose value would be determined by the conference of the parties (BRA, IDN, FJI, BGD) (~~EU~~)]

[6ter. The relevant manufacturers or entities mentioned in paragraph 6 who have been able to develop a relevant pandemic related product using the PABS system and has reached commercialization shall make additional monetary contribution of their total revenue for each product commercialized. The formula for such percentage will be based on a percentage will be determined by the Conference of the Parties (BRA, IDN, FJI, BGD) (~~EU~~)]

(a) annual monetary contributions to support the PABS System and relevant capacities in countries; the determination of the annual amount, use, and approach for monitoring and accountability, shall be finalized by the Parties;

(a) annual monetary contributions to [the fund established pursuant to Article 20 (AF GROUP + EGY)] support [the PABS System and (~~USA, CAN, CHE~~)] relevant capacities in countries [, based on transparency, equity and company size, nature and capacities (USA, CAN, CHE, QAT)]; the determination of the annual amount, use, and

approach for monitoring and accountability, shall be finalized by the Parties [in consultation with relevant stakeholders before WHO begins to negotiate the contracts (USA, JPN, CAN, CHE)];

(b) real-time contributions of relevant diagnostics, therapeutics or vaccines produced by the manufacturer, 10% free of charge and 10% at not-for-profit prices during public health emergencies of international concern or pandemics, to be made available through the Network established under Article 13 for use on the basis of public health risks, needs and demand; and

(b) real-time contributions of relevant diagnostics, therapeutics or vaccines [benefited from the PABS (CHN)] produced by the manufacturer [[which are in conformity with WHO PQ or EUL (CHN)], [up to (USA, UK)] [30 (AF GROUP + EGY, BGD, IRN, SYR)] [10 (~~DEL~~ AF GROUP + EGY, BGD, IRN, SYR) (**RETAIN** USA)]% free of charge [and (~~DEL~~ USA, UK)] [, up to (USA, UK)] 10% at [not-for-profit (~~DEL~~ USA, UK)][affordable (USA, UK)] prices (~~DEL~~ JPN, ROK)] [, or both, (USA, UK)] during public health emergencies of international concern or pandemic[s (~~DEL~~ USA, UK)] [emergencies (USA, UK)], to be made available through the Network established under Article 13 for [use (~~DEL~~ AF GROUP + EGY, BGD, IRN, SYR) (**RETAIN** USA)] [equitable allocation (AF GROUP + EGY, BGD, IRN)] on the basis of [scientific evidence and needs, (USA, UK)] public health risks, [needs (~~DEL~~ USA, UK)] [capacities (USA, UK)] and demand; [and (~~DEL~~ USA, UK)] [or (USA, UK)]

(c) voluntary non-monetary contributions, such as capacity-building activities, scientific and research collaborations, non-exclusive licensing agreements, arrangements for transfer of technology and know-how in line with Article 11, tiered pricing for relevant diagnostics, therapeutics or vaccines.

[(c) [voluntary (DEL AF GROUP + EGY)] non-monetary contributions, such as capacity-building activities, scientific and research collaborations, non-exclusive licensing agreements, arrangements for transfer of technology and know-how [on mutually agreed terms (JPN, CHE, UAE, CAN)] in line with Article 11, [or (USA)] [tiered [and affordable (CHN, BGD, SYR)] pricing for relevant diagnostics, therapeutics or vaccines. (~~DEL~~ AF GROUP + EGY)]

(RESERVE (c) JPN)]

[(d) templates for standard PABS contracts shall be developed, monitored and considered for revision on a regular basis by the Conference of the Parties. (THA)]

[(e) prior to the declaration of a PHEIC, the vaccines, diagnostics and therapeutics manufacturers shall provide free of charge a part of its real time production of each product, not exceeding 20% of its real time production, to address access needs in developing countries, including for the purpose of WHO stockpile on the recommendation of the WHO Director-General in consultation with the Emergency

Committee under the International Health Regulations. (ZAF, BGD, PSE, NGA, MYS) (DEL USA)]

[SUPPORT all Bureau's text on access: THA]

7. The Parties agree on the following benefit-sharing provisions to be applied to users of biological materials and GSD shared through the CLNs and SDBs:

7. The Parties agree [that: (a) entities that use biological materials and DSI for non-commercial purposes shall acknowledge the providers of the biological materials and DSI in relevant presentations or publications; shall contribution to public dissemination and transparency of publication or any other outputs by making the results available through the PABS platform. Such users shall actively engage in scientific or academic collaborations, training and capacity building activities, and consider voluntary monetary contributions to support the PABS system (BRA, CHN, BGD)] [on the following benefit-sharing provisions to be applied to users of [PABS (JPN, USA, CAN, ISR)] biological materials and GSD shared through the CLNs and SDBs (DEL BRA, CHN, FJI, BGD)]:

[7bis Each Party, in respect of such a user operating within its jurisdiction, shall take the necessary legislative, administrative or policy measures to ensure such a user is complying with the terms and conditions of the PABS system (BRA, FJI, IDN, BGD) (DEL EU)]

(a) entities that use biological materials and GSD shared through the CLNs and SDBs for commercial purposes, other than for the manufacture of diagnostics, therapeutics or vaccines, are to support the PABS System through voluntary contributions, taking into account the size, nature and capacities of the entity, such as monetary contributions, capacity-building activities, non-exclusive licensing agreements, arrangements for transfer of technology and know-how in line with Article 11, and/or scientific and research collaborations; and

(a) entities that use [PABS (JPN, USA)] biological materials and GSD shared through the CLNs and SDBs for commercial purposes, other than for the manufacture of diagnostics, therapeutics or vaccines, [against covered pathogens (USA, CAN)] [are (DEL USA, CAN)] [shall be encouraged (USA, CAN)] to support the PABS System through [voluntary (DEL AF GROUP + EGY, NGA, SYR, BGD) (RETAIN USA)] contributions, taking into account the size, nature and capacities of the entity, such as monetary contributions, capacity-building activities, non-exclusive licensing agreements, arrangements for transfer of technology and know-how [on voluntary and mutually agreed terms (USA, CHE, CAN, UK) (DEL IRN)] [in line with Article 11, (RESERVE AF GROUP + EGY, SYR)] and/or scientific and research collaborations; and

(b) entities that use biological materials and GSD shared through the CLNs and SDBs for non-commercial purposes are to acknowledge the providers of the biological materials and GSD in relevant presentations or publications; contribute to public dissemination and transparency of research results; and, as appropriate, taking into account the size, nature and capacities of the entity, actively engage in scientific and academic collaborations, training and capacity-building activities, and consider voluntary monetary contributions to support the PABS System.

Each Party, in respect of such a user operating within its jurisdiction, shall take all appropriate steps, in accordance with its relevant laws and circumstances, to encourage such a user to provide benefits in accordance with subparagraphs (a) and (b) of this Article.

(b) entities that use [PABS (USA, CAN)] biological materials and GSD shared through the CLNs and SDBs for non-commercial purposes [such as public health and academic purposes (JPN)] are to acknowledge the providers of the biological materials and GSD in relevant presentations or publications; contribute to public dissemination and transparency of research results; and, [shall be encouraged to, (USA, CAN)] as appropriate, taking into account the size, nature and capacities of the entity, [actively (DEL USA, QAT, CAN)] engage [with the provider of biological material and GSD (CHN)] in scientific and academic collaborations, training and capacity-building activities, and consider voluntary monetary contributions to support the PABS System [in the event a non-commercial user becomes a commercial user, the user shall be subject to terms and conditions applicable to commercial users and relevant manufacturers and entities (MYS, BGD, IDN)].

Each Party, in respect of such a user operating within its jurisdiction, shall take all appropriate steps, in accordance with its relevant laws and circumstances, to encourage such a user to provide benefits in accordance with subparagraphs (a) and (b) of this Article.

8. The Parties shall cooperate and take appropriate measures, such as conditions in public procurements or on public financing of research and development, prepurchase agreements, or regulatory procedures, to encourage and facilitate as many manufacturers as possible to enter into standard PABS contracts as early as possible.

8. The Parties [in accordance with applicable national laws (AF GROUP + EGY, BGD)] [shall cooperate and (DEL USA, QAT, UK)] (DEL JPN) (RETAIN NGA)] [commit to (JPN) (DEL NGA)] take appropriate measures, [such as conditions in public procurements or on public financing of research and development, prepurchase agreements, or regulatory procedures, (DEL USA, ROK, UK)] to [encourage and facilitate as many (DEL BRA, FJI, BGD, IDN)] [ensure that users of the PABS system comply with their respective benefit sharing commitments, including that relevant manufacturers and entities conclude PABS contracts as early as possible (BRA, FJI, BGD, NGA, IDN) (DEL EU)] manufacturers [as possible to enter into standard (DEL BRA, FJI, BGD, NGA, IDN)] PABS contracts as early as possible.

[8bis. During a pandemic emergency, each Party intends to include provisions in its procurement agreements for relevant diagnostics, therapeutics or vaccines, that require manufacturers to reserve a portion of their production of those products and, in a timely manner, offer the reserved portion for donation or sale at an affordable price for use in

countries facing challenges in meeting public health need and demand for relevant diagnostics, therapeutics or vaccines. (USA, CAN)]

9. During a pandemic, each Party in a position to do so shall, within available resources and subject to applicable laws and in line with Article 13, set aside a portion of its total procurement of relevant diagnostics, therapeutics or vaccines in a timely manner for use in countries facing challenges in meeting public health needs and demand for relevant diagnostics, therapeutics or vaccines.

9. During a pandemic [emergency (JPN)], each Party in a position to do so [shall (~~USA, UK, CAN~~)] [intends to (USA, UK, CAN, AUS)], within available resources and subject to applicable laws and in line with Article 13, set aside a portion of its total procurement of relevant diagnostics, therapeutics or vaccines in a timely manner for use in countries facing challenges in meeting public health needs and demand for relevant diagnostics, therapeutics or vaccines.

[**MOVE** Para 9 text to Article 13 (BRA, FJI, IDN, BGD, MYS)]

10. To support operationalization of the PABS System, WHO shall maintain updated lists of CLNs and SDBs, as well as of known pathogens that are pathogens with pandemic potential. WHO shall report regularly to the Parties on the conclusions of standard PABS contracts, and shall make such contracts public, while respecting commercial confidentiality. WHO shall use measures such as prequalification and the WHO Emergency Use Listing procedure to promote the PABS System and encourage manufacturers to conclude standard PABS contracts.

10. To support operationalization of the PABS System, WHO shall [ensure transparency in all aspects of the PABS system and (MYS)] maintain [on the PABS platform (BRA, IDN, FJI)] updated lists of CLNs and SDBs, as well as [develop criteria for and maintain a list (AF GROUP + EGY, CHN, IDN, MYS)] of known pathogens that are pathogens with pandemic potential. WHO shall report regularly to the Parties on the [PABS Platform (BRA, IDN, FJI)] conclusions of [all (BRA, IDN, FJI)] standard PABS contracts, and shall make such contracts public, [while respecting commercial confidentiality. WHO shall use measures such as prequalification and the WHO Emergency Use Listing procedure to promote the PABS System and encourage manufacturers to conclude standard PABS contracts. (~~BRA, IDN, FJI, IND, MYS~~)]

[10bis. A PABS platform hosted at the WHO is hereby established. The specific modalities for the operation of the PABS platform shall be determined by the Conference of the Parties. The PABS electronic platform shall: (a) enable providers and users of biological materials and their DSI with verifiable credentials, to register to participate at the PABS, by providing name, contact details, email and, as appropriate, issue certificates of registration, (b) provide electronic labels to the PABS biological materials and DSI, (c) provide access to the SDBs through its interface to providers and users of DSI; (d) receive notifications and keep track of the transfer of PABS biological materials; (e) receive notifications of all publication products and services or any other outputs; and (f) provide and disseminate information with respect to activities taking place pursuant to the provisions of the PABS system, including links to relevant publications and benefits provided, and a repository containing results and outputs

made available by non-commercial users of the PABS system. (BRA, IDN, BGD, FJI, MYS, BGD) (**DEL** EU)]

11. Templates for the standard PABS contracts and for legally binding terms of reference agreements with CLNs and SDBs shall be developed by the Parties.

[11. Templates for the standard PABS contracts and for [legally binding (**DEL** USA, QAT, EU) (**RETAIN** SYR)] terms of reference [agreements (**DEL** USA)] with CLNs and SDBs shall be developed by the Parties [in consultation with relevant stakeholders (USA, JPN)].

[11bis. The PABS system, including the obligations to share biological materials and GSD at paragraph 3, shall come into operation when the Director-General, in consultation with [an expert body], determines that sufficient CLNs and SDBs are operational, and that a sufficient number and range of manufacturers [threshold to be determined by Member States such that the benefits secured are sufficient to ensure fair and equitable benefit sharing] have concluded PABS contracts pursuant to paragraph 6 (UK, EU, NZL, CAN, USA, AUS)]

DEL PARA 11 (BRA, AF GROUP + EGY)]

12. The Parties who are Parties to the Convention on Biological Diversity and its Nagoya Protocol recognize that the PABS System, when fully operational, is consistent with and does not run counter to the objectives of the Nagoya Protocol; shall function as a specialized international access and benefit -sharing instrument; and is the applicable access and benefit-sharing system for biological materials and GSD for pathogens with pandemic potential. Accordingly, each such Party shall take effective legislative, executive, administrative or other measures at the appropriate government level to give effect to this recognition. Parties who are not Parties to the Convention on Biological Diversity and its Nagoya Protocol shall take such measures with respect to any relevant domestic legislation to ensure alignment with the objectives and implementation of this provision.

12. The Parties[, in accordance with international rights and obligations of each state, (JPN, USA, NZL, CAN)] [who are Parties to the Convention on Biological Diversity and its Nagoya Protocol (**DEL** JPN, USA, NZL, CAN)] recognize that the PABS System, [when fully operational, (**DEL** USA)] is consistent with and does not run counter to the objectives of the Nagoya Protocol; shall function as a specialized international access and benefit -sharing instrument [under Article 4.4 of the Protocol (JPN, USA, NZL, UK, CAN)]; and is the applicable access and benefit-sharing system for biological materials and GSD for pathogens with pandemic potential. Accordingly, each such Party shall take effective legislative, executive, administrative or other measures [at the appropriate government level to give effect to this recognition. Parties who are not Parties to the Convention on Biological Diversity and its Nagoya Protocol shall take such measures (**DEL** JPN, USA, NZL, CAN)] with respect to any relevant domestic legislation to ensure alignment with the objectives and implementation of this provision.

DEL PARA 12 (BRA, AF GROUP + EGY, MYS, IDN, BGD) (**RETAIN** UK, NZL) (**RESERVE** CHN, TUR, IRN)]

RETAIN Bureau's text (EU)

13. The Parties shall cooperate to support the effective operation of the PABS System, including by taking all necessary steps to facilitate the shipment of biological materials, and the export of necessary health products during a public health emergency of international concern or pandemic, in accordance with applicable international law.

13. The Parties shall [, to the extent possible, (JPN, USA, UK, CAN)] cooperate to [support (**DEL** USA)] [facilitate (USA)] the effective operation of the PABS System, [including by taking all necessary (**DEL** USA)] [and are expected to take (USA)] steps to facilitate the [safe and secure (USA, UK, CAN)] shipment of [PABS (JPN, USA, UK, CAN)] biological materials [publicly accessible sharing of PABS GSD, (USA)] [through applicable terms and conditions in standard PABS contracts (AF GROUP + EGY, BGD)], and [the operationalization of legal commitments to provide benefit sharing under the PABS system, such as the manufacture and export of relevant pandemic-related products (BRA, COL, IDN)] the [export of necessary health products (**DEL** BRA, COL, IDN)] during a public health emergency of international concern or pandemic [emergency (JPN, USA, CAN)], [pursuant to paragraph 6, (BRA, COL, IDN)] [in accordance with (**DEL** UK) (**RETAIN** BRA, COL, IDN, NGA)] [subject to (UK) (**DEL** BRA, COL, IDN)] applicable [national and (UK, JPN, USA) (**DEL** BRA, COL, IDN)] international [and national (CHN, AUS, SAU, UAE, AF GROUP + EGY, SYR, QAT)] law[s, standards and guidelines (UK)].

14. The Conference of the Parties shall regularly review the operation, monitor adherence and effectiveness of the PABS System and shall take the decisions necessary to promote and support its effective and sustainable implementation.

[14. The Parties agree that all features of the PABS system shall become operational simultaneously. (BRA, ARG, IDN, BGD)] The Conference of the Parties shall regularly review the operation, monitor adherence and effectiveness of the PABS System and shall take the decisions necessary to promote and support its effective and sustainable implementation [in a manner consistent with this Article (JPN, USA)]. [Parties commit to fund the operation of the PABS system not covered by monetary contributions, if any. (AF GROUP + EGY, BGD) (**DEL** USA)]

[14bis. The Conference of the Parties shall determine the following modalities that will apply to the PABS system for its effective operationalization including the: (a) terms and conditions of the PABS system; (b) terms of the legally binding data hosting agreements between the WHO and SDBs and terms and conditions applicable to the users of DSI; (c) terms of the legally binding agreement between the WHO and laboratories participating in the CLN; (d) terms and conditions of users of biological materials including of the standard PABS contracts between the WHO and relevant manufacturers and entities; (e) modalities of CLN, including

criteria for participation; and (f) any other modalities of the PABS system. (BRA, COL, BGD, IDN) (**DEL** EU)]

[14^{ter}. WHO shall continue to apply the PIP Framework to the sharing of H5N1 and other influenza viruses of human pandemic potential, including benefit sharing. For other pathogens with pandemic potential, the sharing of biological material and their GSD under the auspices of WHO or any of its initiatives and mechanisms shall be through the PABS system. (MYS, BGD)]

[**REPLACE** “genetic sequence data” with “digital sequence information” throughout Article 12 (BRA, GTM, FJI, ARG, CRI, DOM, IDN)]

[**RETAIN** term “genetic sequence data” in Article 12 (UK, CAN, USA, CHE, ISR, JPN, EU)]

Article 13. Supply chain and logistics

1. The Global Supply Chain and Logistics Network (the Network) is hereby established. The Network shall be developed, coordinated and convened by WHO in partnership with the Parties and other relevant international and regional stakeholders, and shall be guided by the principles of equity, transparency, inclusivity, timeliness, fairness and consideration of public health needs. The Network shall pay particular attention to the needs of developing countries, including those in fragile and humanitarian settings.

1. The Global [Supply Chain and Logistics (**DEL** USA, CAN, UK)] [emergency medical countermeasures (USA, CAN, UK)] Network (the Network) [on pandemic-related health products (JPN)] is hereby established [, as a partnership (EU)]. [The Network shall be (**DEL** EU)] developed, coordinated and convened by WHO in partnership with the Parties [and other relevant international [and regional (**DEL** CHN, IRN)] stakeholders (**DEL** RUS, SYR)], and shall be guided by the principles of equity, transparency, [accountability, (IRN, CHN, SYR, PRK)] inclusivity, timeliness, fairness and consideration of public health needs. The Network shall [consider the needs of developing countries and (EU, CAN)] pay particular attention to the needs [and related concerns of developing countries (IRN, CHN, SYR, PRK)] of the [least developed countries (**DEL** IRN, CHN, SYR, ZAF, NIC, PRK) (**RETAIN** COL)] [and of persons living in fragile situations (EU, CAN)], including those in fragile and humanitarian settings.

[1^{bis}. The Parties of the Agreement undertake not to impose restrictions on the supply, distribution or procurement of any medical and health-related products, including medicine, medical equipment, spare parts, raw materials, software, access codes, due to any sanctions or other restrictive measures or means of their enforcement and to ensure that pharmaceutical companies, medical equipment producers and other companies and banks on their territories under their jurisdiction or control do not cause any impediments for procurement, delivery or

distribution of such goods (BLR, CHN, PRK, IRN, NIC, SYR, RUS, VEN, ZWB, TUN, PSE, CUB, PAK) (DEL USA, UK, EU, CAN, AUS)]

[Support Bureau Text (AF GROUP + EGY)]

2. The Conference of the Parties shall, at its first meeting, define the structure and modalities of the Network, which shall aim at ensuring the following:

2. The Conference of the Parties shall [provide guidance to the Network (EU)], at its first meeting [aimed at adopting terms of reference developed by WHO and Member States (RUS)], [in consultation with relevant organizations that will operate the network (USA, NOR, CAN, UK)] define the [structure and modalities (DEL RUS)] of the Network, [which shall (DEL EU)] [with the (EU)] aim at [ensuring (DEL EU)] [to promote (EU)] the following:

(a) collaboration among the Parties and other relevant stakeholders during and between pandemics;

(a) collaboration among the Parties and other relevant stakeholders during and between pandemics;

(b) assignment of functions to stakeholders based on competencies and expertise; and

[(b) assignment of functions to stakeholders based on competencies and expertise; and (DEL (b) RUS, SYR)]

(c) accountability and transparency in the functioning of the Network.

(c) accountability and transparency in the functioning [and governance (CAN)] of the Network.

3. The Parties shall periodically review the operationalization of the Network, including the support provided by Parties and other stakeholders during and between pandemics.

3. The Parties shall periodically review the [functions and (UK, USA, PAK)] [operationalization (DEL EU)] [functioning (EU)] of the Network, including the [role of WHO and (UK, USA)] support provided by Parties and other stakeholders during and between pandemics [and approve or adopt by the governing body (RUS)].

4. The functions of the Network shall include:

4. The functions of the Network[, subject for approval and modification as needed at the first meeting of the governing body, (RUS)] shall include:

[NOTE: prefer phrase “safe, timely, effective, quality, affordable” products throughout article (RUS, PSE)]

[NOTE: any reference to parties or organizations other than Member States or WHO should be followed by “need to work in accordance with principles of FENSA” (RUS, CHN)]

- (a) identifying the types of pandemic-related products and estimating the quantities needed and anticipated demand for robust pandemic prevention, preparedness and response;

[(a) to set a regular review mechanism to (RUS)] identify[ing (DEL RUS)] the types of pandemic-related [health (EU)] products and estimating the quantities needed and anticipated demand for robust pandemic prevention, preparedness and response [based on expert scientific advice (BGD, CHN, PAK, PSE, IDN, PHL, ZAF, BOL)];

- (b) identifying the sources of safe, effective and quality assured pandemic-related products, including raw materials and potential surge capacities as well as developing and maintaining a tool for this purpose;

[(b) To set the open and regular review mechanism for (RUS)] Identifying[, assessing and keeping under review (EU, CAN, UK)] the sources of safe, effective and quality assured pandemic-related [health (EU)] products, including [scarce (USA, CAN, UK)] raw materials and potential surge capacities [as well as developing and maintaining a tool for this purpose (DEL EU, IND)];

- (c) identifying, assessing, keeping under review and facilitating the most efficient means of procuring quality pandemic-related products, potentially including pooled procurement and/or advance purchase agreements, to enhance equitable, timely and affordable access to these products;

(c) identifying, assessing, [keeping under review (DEL IND, BGD)] and facilitating the most efficient means of procuring [safe and effective (UK, USA)] quality pandemic-related [health (EU)] products s [during pandemic emergencies (USA)], [potentially (DEL EU)] including pooled procurement and/or advance purchase agreements [, where applicable (EU)], to enhance equitable, timely and affordable access to these products [at all times (PSE, TUN, SYR)] [preferably by coordinating with national procurement mechanisms (IND, BGD)];

- (d) promoting transparency in cost, pricing and other relevant data on products, including raw materials, across the value chain;

(d) [promoting (**DEL PHL**)] [ensuring (PHL)] [full (PHL)] transparency [by publishing key information including but not limited to (MYS, BGD)] in cost, pricing [supply information, licensing information (MYS, PSE, PHL)] and other [relevant (**DEL USA**)] [related (USA)] [unprotected (JPN, CHE, PHL, PSE)] data on [all (BRA, COL, GTM, SLV, HON, URY, ECU, CRI, BGD, PHL)] products, including raw materials, across the value chain [while not requiring the disclosure of confidential information of particular enterprises (CHN, BGD, SYR)] [, including ancillary costs and contracts (BRA, COL, GTM, SLV, HON, URY, ECU, CRI, PHL, BGD, PHL)];

(e) promoting and coordinating within the Network to avoid competition for resources among international procuring entities, including regional organizations and/or mechanisms;

(e) promoting [and coordinating (**DEL EU**) (RETAIN IND)] [coordination (EU)] within the Network [and with national procurement mechanisms (IND)] to [avoid (**DEL CAN**)] [minimize (CAN)] competition for [resources (DEL USA)] [products (USA)] among international procuring entities, including regional organizations and/or mechanisms [during pandemic emergencies (USA)];

(f) collaborating with relevant national authorities and organizations/institutions, as appropriate, and taking into account national and regional circumstances to establish, strengthen and maintain national, regional and/or international stockpiles of various pandemic-related products, including stockpiles earmarked for humanitarian settings, as well as to maintain related logistic capacities and assess them at regular intervals;

(f) collaborating with relevant national authorities and organizations/[institutions (**DEL EU**)] [including production facilities referred to in Article 10.2(a) (BGD, PAK, PSE, CHN, MYS, SYR, NGA, IDN, PHL, ZAF, BOL)], as appropriate, and taking into account national and regional circumstances to establish, strengthen and maintain [and regularly assess (EU)] national, regional and/or international stockpiles of [various (**DEL UK, USA**)] [appropriate (UK, USA)] pandemic-related [health (EU)] products, including stockpiles earmarked for humanitarian settings, as well as to maintain related logistic capacities and assess them at regular intervals;

(g) facilitating the equitable allocation of pandemic-related products, including those procured through the facilitation by the Network, acquired through the PABS or donated by countries as referred to in Article 13bis, paragraph 2, based on public health risks and needs, and taking into account factors, such as population size, demographic structure, epidemiological situation and health system capabilities of beneficiary countries and their readiness and capacity to utilize such products;

[(g) [facilitating (**DEL CAN, UK**)] [coordinating (CAN, UK)] the [timely and (CAN, USA, UK)] equitable allocation of pandemic-related [health (EU)] products [made available to (EU)], [including those procured through the [facilitation (**DEL UK**)] [means facilitated (UK)] by (**DEL EU**)] the Network [from the production facilities referred to in Article 10.2(a) (BGD,

PAK, CHN, MYS, SYR, NGA, IDN, PHL, ZAF, BOL)], [acquired through the PABS or donated by countries as referred to in Article 13bis, paragraph 2, (DEL EU)] based on public health risks and needs, and taking into account factors, such as population size, demographic structure, epidemiological situation[, [all (IRN)] humanitarian settings (EU, PSE, IRN)] and health system capabilities [and humanitarian needs in (BRA, COL, GTM, SLV, HON, URY, ECU, CRI, PSE, PAK, IRN CHN, BGD, TUN, SYR, IDN)] of beneficiary countries and their readiness and capacity to utilize such products;

RESERVE (g) (JPN)]

[Retain Bureau text with BRA edits (IND)]

(h) facilitating the most efficient delivery and distribution of pandemic-related products, including, as appropriate, through regional stockpiles, consolidation hubs and staging areas, while taking into account specific requirements for these pandemic-related products, including in humanitarian settings; and

(h) facilitating the most efficient delivery and distribution of pandemic-related [health (EU)] products [including in humanitarian settings (EU, PSE, CRI, CAN)], including[, as appropriate, (DEL EU)] through [subregional and (BRA, COL, GTM, SLV, HON, ECU, URY, CRI) regional stockpiles, consolidation hubs [and other appropriate means (EU)] and staging areas, while taking into account specific requirements [, such as expiration dates, (BRA, COL, GTM, SLV, HON, URY, ECU, CRI) for [these pandemic-related products, (DEL EU)] [such products (EU)] including in humanitarian settings [during pandemic emergencies (USA, PSE)]; and

(i) assisting countries in meeting the requirements for the effective utilization of specific pandemic-related products, as needed and requested.

(i) assisting countries in meeting the requirements for the effective utilization of specific pandemic-related [health (EU)] products [during pandemic emergencies (USA)], as needed and requested.

[(j) facilitating the coordination of and fostering joint collaboration for research and development of pandemic health products for public health needs. (IDN, ZAF)]

5. The WHO, as the convenor of the Network, shall report regularly to the Conference of the Parties on all matters relevant to the implementation of this Article.

The [WHO, as the convenor of the (DEL EU)] Network, shall report regularly to the Conference of the Parties on all matters relevant to the implementation of this Article.

[Support all Bureau's text in Art 13 (MYS, FJI)]

Article 13bis: National procurement- and distribution-related provisions

Article 13bis: National procurement[- (DEL USA)] and distribution[(-related provisions (DEL USA))]

1. Each Party shall publish the terms of its government-funded purchase agreements for pandemic -related products at the earliest reasonable opportunity and in accordance with applicable laws, and shall exclude confidentiality provisions that serve to limit such disclosure. Each Party shall also encourage [regional and global purchasing mechanisms] to do the same.

1. Each Party shall publish the terms of its [government-funded (DEL USA, PAK) (RETAIN UGA)] purchase agreements [with manufacturers (USA)] for pandemic-related [health (USA, QAT)] products at the earliest reasonable opportunity and in accordance with applicable laws, and shall exclude confidentiality provisions that serve to limit such disclosure. Each Party shall also encourage [regional and global purchasing mechanisms] to do the same.

[1*alt.* During a pandemic, each Party shall endeavour to, in accordance with applicable law and as appropriate: (a) exclude unreasonable confidentiality provisions in government-funded procurement agreements; (b) [publish (DEL EU)] [make publicly available (EU)] relevant terms of its government-funded purchase agreements for pandemic-related [health (EU)] products at the earliest reasonable opportunity; and (c) [WHO shall also (IND)] encourage regional and global purchasing mechanisms to do the same. (NZL, AUS, CAN, CHE, JPN, SGP, EU, ISR, UK, ROK, IND)]

2. Each Party, in accordance with national laws, shall include provisions in government-funded purchase agreements for pandemic-related products that promote timely and equitable global access to such products, such as provisions that:

2. Each Party[, in accordance with [national (DEL EU) (RETAIN KEN)] [domestic (EU) (DEL KEN)] law[s (DEL CAN)] [and policy (EU)], (DEL PAK)] [[shall (DEL USA, QAT) (RETAIN BRA)] [intends to (USA, AUS, IND) (DEL BRA)] include (DEL ISR)] [consider including (ISR)] [to the extent possible (EU, AUS)] provisions in [government-funded (DEL USA)] [its (USA)] purchase agreements for pandemic-related [health (EU)] products that promote timely and equitable [global (DEL EU)] access [during a pandemic (CAN, UK, MYS)] to such products[, [such as (DEL EU)] [including (EU)] provisions (DEL PAK)] that:

[2*bis.* During a pandemic, each Party in a position to do so shall, within available resources and subject to applicable laws, set aside a portion of its total procurement of relevant diagnostics, therapeutics or vaccines in a timely manner for use in countries facing challenges in meeting public health needs and demand. (BRA)]

(a) permit the donation of such products outside of its territories;

(a) [permit (DEL EU, AUS)] [facilitate (EU)] the donation of such products outside of its territories [, preferably worldwide (NOR, COL)];

(b) facilitate potential modifications in order to address supply gaps around the world;

(b) facilitate potential modifications [to such purchase agreement (EU)] [, especially in delivery schedules, (NOR, COL)] in order to address supply gaps around the world;

[incentivize or otherwise (DEL EU)] encourage licensing[, preferably on a non-exclusive basis (NOR, COL, CHN, MYS, PAK, CRI, MYS)] and [other (DEL NOR, COL, CHN, CRI, MYS)] transfer of technology [on voluntary and mutually agreed terms (USA, CHE, UK, CAN, EU, AUS, JPN, NZL) (DEL CHN, ZAF, IRN, BGD, NGA, BOL)], in particular for the benefit of developing countries [and other production facilities referred to in Article 10.2(a) (BGD, CHN, MYS, ZAF, NGA, PHL)] [at all times and during humanitarian emergency settings (PSE)]; and

[RETAIN Bureau's text IDN]

(c) incentivize or otherwise encourage the formulation and sharing of global access plans for the products.

[incentivize or otherwise (DEL EU)] encourage the formulation and sharing of global access plans for the products.

3. The Parties recognize the importance of ensuring that any emergency trade measures designed to respond to a pandemic are targeted, proportionate, transparent and temporary, and do not create unnecessary barriers to trade or unnecessary disruptions in supply chains.

3. The Parties [[recognize the importance of (DEL IRN, CHN, BLR)] [commit to (IRN, CHN, BLR, SYR)] ensur[ing (DEL IRN, SYR)] (DEL EU, NZL, CRI)] [agree (EU, CRI)] that any emergency trade measures designed to respond to a pandemic [if deemed necessary (USA, CAN)] [are (DEL EU, NZL, CRI)] [shall be (EU, NZL)] targeted, proportionate, transparent and temporary, and [do (DEL EU, NZL, CRI)] [shall (EU, NZL, CRI)] not create [barriers to access (BRA)] unnecessary barriers to trade or [unnecessary (DEL BRA)] disruptions in supply chains [with particular consideration for products allocated through the Global Supply Chain Network (NOR, PAK, MYS)].

4. The Parties commit to ensure rapid and unimpeded access of humanitarian relief personnel, as well as their means of transport, supplies and equipment, in accordance with international humanitarian law,

and to respect the principles of humanity, neutrality, impartiality and independence of recognized humanitarian organizations for the provision of humanitarian assistance.

4. The Parties [while respecting national sovereignty (CHN, SYR, BOL, BGD)] [commit to [ensure (DEL CHE, MCO)] [allow and facilitate (CHE, MCO)] (DEL USA)] [affirm the importance of allowing and facilitating, in a manner consistent with relevant provisions of international law, including international humanitarian law (USA)] rapid and [unimpeded (DEL USA)] [unobstructed (USA)] access of humanitarian relief personnel, as well as their means of transport, supplies and equipment, [in accordance with international humanitarian law, (DEL USA)] [and national laws, (IRN, CHN, SYR)] and to respect the principles of humanity, neutrality, impartiality and independence [of [recognized (DEL CHE, MCO)] [impartial (CHE, MCO)] humanitarian organizations (DEL EU, USA)] for the provision of humanitarian assistance.

[4alt. The Parties shall, as appropriate, comply with international humanitarian law, including its rules relating to access of humanitarian relief personnel, as well as their means of transport, supplies and equipment. (CAN, MCO)]

[4alt.bis. The Parties acknowledge the principles of humanity, neutrality, impartiality and independence for the provision of humanitarian assistance. (CAN, MCO)]

5. Whenever possible, each Party shall take appropriate measures to promote rational use and reduce waste of pandemic-related products, including through the sharing of products, and taking into account the circumstances of recipient countries.s

5. [Whenever possible, (DEL EU, BRA, CRI)] each Party shall take appropriate measures to promote rational use and reduce waste of pandemic-related [health (EU, CRI)] products, [including through the sharing of products, and taking into account the circumstances of recipient countries (DEL BRA, USA, CRI)].

6. Each Party shall ensure that any national stockpiles do not unnecessarily exceed quantities needed for domestic public health emergency preparedness and response.

6. Each Party [shall ensure [in accordance with domestic law (EU)] that any (DEL USA)] [should avoid having (USA)] national stockpiles [that (USA)] [of pandemic-related health products with supply constraints (NOR)] [do not (DEL USA)] unnecessarily exceed quantities needed for domestic public health emergency preparedness and response.

7. Whenever possible, when sharing pandemic emergency response with countries, organizations, or any mechanism that is facilitated by the Network, each Party shall abide by the following:

7. Whenever possible, when sharing pandemic [emergency response (DEL NOR, EU, USA, UK)] [related health products (NOR, EU, USA, UK)] with countries, organizations, or any mechanism that

is facilitated by the Network, each Party [shall (**DEL** JPN, UK)] [should (JPN, UK)] abide by the following:

(a) The selection and shelf life of pandemic emergency response-related products are data driven and in alignment with identified needs and the distribution and administration/dispensing timelines and capabilities of the recipients;

(a) The selection and shelf life of pandemic [emergency response (**DEL** EU)]-related products [are data driven and in alignment with identified (**DEL** EU)] [take into account the (EU)] needs [, EU)] [and the (**DEL** EU)] distribution and administration/dispensing timelines and capabilities of the recipients [as well as demand (EU)];

[*abis.* Parties shall prioritize sharing through the Global Supply Chain and Logistics Network for equitable allocation based on public health risk and need over bilateral donation agreements. (NOR, USA, UK)]

(b) Prospective recipients are made aware of any expiration dates, availability of the products, and required ancillaries as far in advance as possible;

(b) Prospective recipients are [made aware of (**DEL** EU)] [informed (EU)] [any expiration dates, (**DEL** EU)] availability of the products [and their expiration dates (EU)], [and required ancillaries (**DEL** EU)] [as far in advance as possible (**DEL** TUN)] [at least six months (TUN)];

(c) As appropriate, sharing Parties coordinate with each other and with other global or regional access mechanisms, to maximize allocation to populations with the highest risk and greatest public health need and to facilitate rapid absorption/administration;

(c) As appropriate, sharing Parties coordinate with each other and with other global or regional access mechanisms, to maximize allocation to populations with the highest risk and greatest public health need and to facilitate rapid [absorption (**DEL** EU)]/administration;

(d) Products shared with global or regional access mechanisms are unearmarked for greatest effectiveness and to support long-term planning;

(d) Products shared with global or regional access mechanisms are unearmarked [to the extent possible (CHN)] for greatest effectiveness and to support long-term planning;

(e) Sharing Parties release products in large volumes and in a predictable manner, in order to reduce transaction costs and facilitate recipient planning; and

(e) Sharing Parties release products in [large (DEL NOR, EU, CHE, USA, UK)] [adequate (NOR, USA, UK)] volumes and in a predictable [and concerted (TUN)] manner, in order to reduce [transaction (DEL EU)] costs and facilitate recipient planning; and

(f) Shared products are accompanied by essential ancillaries and coordinated with the availability of support for distribution and administration, to ensure rapid allocation and absorption.

(f) Shared products are accompanied by essential ancillaries [as determined by the Network (CAN)] and coordinated with the availability of support for distribution and administration, to ensure rapid allocation and absorption.

[(f)alt. Shared products are accompanied by essential ancillaries as far as possible as well as all necessary documents attesting the quality and characteristics of the products to ensure their rapid administration. (EU)]

8. Each Party shall facilitate the effective distribution, delivery and administration of pandemic-related products in its domestic market.

8. Each Party shall facilitate the effective distribution, delivery and administration of pandemic-related products in its domestic market.

[DEL ART 13bis. (RUS, BLR)]

[Support Bureau's text for 13bis (AF GROUP + EGY, FJI, AF GROUP + EGY)]

Article 14. Regulatory systems strengthening

1. Each Party shall strengthen its national and, where appropriate, regional regulatory authority responsible for the authorization and approval of pandemic-related products, including through technical assistance and/or cooperation with WHO, other Parties and relevant organizations, as appropriate, with the aim of evaluating and monitoring the quality, safety and efficacy of such products.

1. Each Party shall strengthen its national and, where appropriate, regional regulatory authority responsible for the authorization and approval of pandemic-related [health (EU)] products, including through technical assistance and[/or (DEL AF GROUP + EGY, EU)] cooperation with WHO [as and when requested (IND)], [[other Parties and relevant organizations, (DEL RUS)] as appropriate (DEL IND)], with the aim of [evaluating and [ensuring and (RUS)] monitoring (DEL EU)] [ensuring (EU)] the quality, safety and efficacy of such products [by national system (RUS)].

2. Each Party shall take steps to ensure that it has legal, administrative and financial frameworks, as appropriate, in support of:

2. Each Party shall [in accordance with national laws and regulations, (JPN)] [endeavor to (AF GROUP + EGY)] take [steps (~~DEL~~ AF GROUP + EGY)] [measures (AF GROUP + EGY)] to ensure that it has legal, administrative and financial frameworks [, as appropriate, (~~DEL~~ EU)] in support of:

[Support Bureau text (IND)]

(a) issuing emergency authorizations and approvals for pandemic-related products and/or, as appropriate, regulatory reliance processes for the timely authorization and approvals of such products, consistent with national law, as well as systems to provide oversight of the quality, safety and efficacy of those products; and

(a) [issuing [emergency (~~DEL~~ EU)] [urgent regulatory (EU)] [authorizations [or temporary (CHE)] and approvals (~~DEL~~ AUS) [consistency (AUS)]] [timely evaluation (AUS)] for pandemic-related [health (EU)] products and[/or (~~DEL~~ EU)], as appropriate, regulatory reliance processes for the timely authorization and approvals of such products [, consistent (~~DEL~~ AF GROUP + EGY)] [in accordance (AF GROUP + EGY)] with [national (~~DEL~~ EU)] [domestic (EU)] law [and policies (AF GROUP + EGY), as well as systems to provide oversight of the quality, safety and efficacy of those products; and

(b) monitoring adverse events of such products through effective pharmacovigilance and post-marketing surveillance.

(b) monitoring adverse events of such products through effective [pharmaco (~~DEL~~ USA, UK)] vigilance and post-marketing surveillance.

[(c) sharing of regulatory dossiers between national regulatory authorities through WHO (BGD)]

[(d) registering pandemic-related products with national regulatory authorities of other Parties in particular of developing country parties (BGD)]

3. The Parties shall, as appropriate, monitor and strengthen rapid alert systems against substandard and falsified pandemic-related products.

3. The Parties shall, [to the greatest extent possible and (CAN)] [in accordance with national laws and regulations, (JPN)] as appropriate, monitor and strengthen rapid alert systems against substandard and falsified pandemic-related [health (EU)] products.

RETAIN Bureau's text (PHL)

4. Each Party shall, consistent with national laws, encourage manufacturers of pandemic-related products, as appropriate, to generate and submit in a timely manner, relevant data and diligently pursue regulatory authorizations, approvals and/or prequalification of pandemic-related products with WHO, WHO listed authorities and other authorities as appropriate.

4. Each Party shall, consistent with [national (~~DEL~~ EU)] [domestic (EU)] laws, encourage [and support developers and (EU)] manufacturers of pandemic-related [health (EU)] products[, as appropriate, (~~DEL~~ AF GROUP + EGY)] to generate and submit in a timely manner, relevant [regulatory (AF GROUP + EGY)] data [including the regulatory dossier (BGD)] and diligently pursue regulatory authorizations [, approvals and[/or (~~DEL~~ EU)] [prequalification (~~DEL~~ IND, BGD)] of pandemic-related products with WHO, (~~DEL~~ BGD)] WHO listed authorities[and national regulatory authorities (IND, BGD)] [and other authorities as appropriate. (~~DEL~~ IND, BGD)]

5. Each party shall, in accordance with national laws, with the aim of enhancing transparency and regulatory reliance, make publicly available and keep updated in a timely manner:

5. Each party shall, in accordance with [[national] [domestic (EU)] laws (~~DEL~~ AUS) [applicable law AUS)], with the aim of enhancing transparency and regulatory reliance, [for pandemic-related products (BGD, MYS)] make publicly available and keep updated in a timely manner:

(a) information on national and, if applicable, regional regulatory processes for authorizing or approving use of pandemic-related products; and

(a) information on national and, if applicable, regional regulatory processes for authorizing or approving use of pandemic-related [health (EU)] products; and

(b) information on the pandemic-related products that it has authorized or approved, based on quality, efficacy and safety, and any other information on which the decision was based.

The Parties encourage WHO to facilitate access to the information referred to in this paragraph.

(b) information on the pandemic-related [health (EU)] products that it has authorized or approved [including data (USA) (~~DEL~~ IND)], based on quality, efficacy and safety, and [as appropriate (JPN, AUS, SGP)] any other information on which the decision was based.

[The Parties encourage WHO to facilitate access to the information referred to in this paragraph. (~~DEL~~ AF GROUP + EGY, IRN)]

6. Each Party shall endeavour to, subject to national laws:

6. Each Party shall endeavour to, subject to [national (~~DEL~~ EU)] [domestic (EU)] laws:

(a) adopt, where needed, regulatory reliance processes in its national regulatory frameworks for use during pandemic emergencies, taking into account relevant guidelines;

(a) adopt, where needed, regulatory reliance processes [for pandemic-related products (BGD)] in its national regulatory frameworks for use during pandemic emergencies, taking into account relevant guidelines;

(b) converge and/or align and, where possible, harmonize relevant technical and regulatory requirements, in accordance with applicable international standards and guidance; and

[(b) converge and/or align and, where possible, harmonize relevant technical and regulatory requirements, in accordance with applicable international standards and guidance; and

DEL (b) (IND, BGD)]

(c) provide support to help strengthen national regulatory authorities' and regional regulatory systems' ability to respond to pandemic emergencies, as appropriate, through efforts such as technical assistance, capacity-building, training and information exchange consistent with national law.

(c) provide support to [help (**DEL AF GROUP + EGY**)] strengthen national regulatory authorities' and regional regulatory systems' ability to respond to pandemic [emergencies [including during humanitarian emergency settings (PSE, TUN, IRN)], [on mutually agreeable terms, (JPN)] as appropriate, (**DEL AF GROUP + EGY**)] through [efforts such as (**DEL EU, AF GROUP + EGY**)] technical assistance, capacity-building, training and information exchange consistent with [national (**DEL EU**)] [domestic (EU)] law.

7. Each Party may consider adopting, within the limits of its national legislation, policies and legal practices, guidance and technical documents concerning medical products from relevant international regulatory harmonization initiatives or organizations and other relevant global or regional regulatory forums.

[7. Each Party may consider adopting, within the limits of its national legislation, policies and legal practices, guidance and technical documents concerning medical products from relevant international regulatory harmonization [initiatives or (**DEL USA**)] organizations [such as the International Council for Harmonization of Technical Requirements for Pharmaceuticals for Human Use (ICH) and the International Medical Device Regulators Forum (IMDRF) (USA) (**RESERVE AF GROUP + EGY, IRN**) (**DEL RUS**)] and other relevant global or regional regulatory forums.

DEL PARA 7 (IND)]

8. The Parties shall undertake to cooperate, to the extent possible, directly or indirectly and/or through relevant international bodies including WHO and other relevant partners, to support and improve regulatory capacity with the goal of enhancing the maturity level of the regulatory bodies, as assessed by WHO, and facilitating equitable geographical distribution and scaling up of the global production of medical products.

[8. The Parties shall [undertake (**DEL AF GROUP + EGY**)] to cooperate, to the extent possible, directly or indirectly and/or through relevant international bodies including WHO and other relevant partners, to support and improve regulatory capacity with the goal of enhancing the maturity level of [a requesting regulatory body (USA)] [the regulatory bodies (**DEL USA**)], as assessed by WHO, and facilitating equitable geographical distribution and scaling up of the global production of medical products [at all times (PSE)].

DEL PARA 8 (IND, BGD, RUS) (**RETAIN AF GROUP + EGY**)

[9. The Parties shall undertake to cooperate as appropriate to develop and support strategies to strengthen WHO capacities for emergency use listing, prequalification and any other relevant processes for recommending the use of pandemic-related health products and ensuring the continued regulatory oversight of these products (USA) (**RESERVE RUS**)

Article 15. [Liability and compensation management

1. Each Party shall consider developing, as necessary and in accordance with applicable law, national strategies for managing liability in its territory related to pandemic vaccines and shall make such strategies publicly available. Strategies may include, inter alia, legal and administrative frameworks; no-fault compensation mechanisms, potentially funded by private sector contributions; policies and other approaches for the negotiation of procurement and/or donation agreements.

1. [Each Party [shall (**DEL AF GROUP + EGY, CHN, SYR**) (**RETAIN AUS**)] [may (AF GROUP + EGY, CHN, SYR)] [consider developing (**DEL USA, QAT**) (**RETAIN AUS, UK**)] [and making publicly available (AUS)] [develop (USA)], as necessary and in accordance with [applicable] [national (AF GROUP + EGY)] law [and national context (CAN)], national strategies for managing liability in its territory related to [novel (EU)] pandemic vaccines [at all times (PSE, SYR, EM Region)] [, taking into account the resources available at hand (BGD)] [[and [shall (**DEL EU**)] make[ing (EU)] such strategies publicly available (**DEL AUS**)] (**DEL AF GROUP + EGY, SYR, CHN**)] [such strategies may include inter alia (AF GROUP + EGY)]. (**NOTE: Move to Article 13(8)bis (BRA, ECU)**] Strategies may include, inter alia, legal and administrative frameworks; no-fault compensation mechanisms [for serious adverse events resulting from the use of novel vaccines developed in response to pandemics (EU)], [potentially funded by (**DEL EU**)] [including (EU)] private sector contributions [and in the context of the funding mechanisms established under Article 20 of this Agreement (AF GROUP + EGY)]; [[insurance (USA)] policies and other approaches for the negotiation of procurement and/or donation agreements [, including circumstance-based time limitations, model contract provisions, and building expertise in relevant agencies (USA)] (**DEL AF GROUP + EGY**)]. [Such compensation mechanisms shall take into account the situation of individuals that are in humanitarian settings or in vulnerable situations. (EU)]

2. The Parties, within the framework of the Conference of the Parties, in collaboration with relevant entities and multilateral organizations, as appropriate, shall develop recommendations for the establishment and implementation of national, regional and/or global no-fault compensation mechanisms and strategies for managing liability during pandemic emergencies, including with regard to individuals that are in a humanitarian setting or vulnerable situations.

2. [The Parties, within the framework of the Conference of the Parties, in collaboration with relevant entities and multilateral organizations, as appropriate, shall develop recommendations [for (DEL EU)] [and encourage where needed (EU)] the establishment and implementation of [national (DEL EU)], regional and/or global no-fault compensation mechanisms and strategies for managing liability during pandemic emergencies, [including (DEL EU)] with [particular (EU)] regard to individuals that are in a humanitarian [emergency (PSE, SYR, EM Region)] setting [or people who may be in (AUS, CAN)] [or (DEL AUS)] vulnerable situations. [Developing country parties shall not be denied timely access to the pandemic-related products, owing to the reason that these strategies do not include no-fault compensation mechanisms or indemnity clauses. (BGD, SYR)]

DEL PARA 2 (AF GROUP + EGY)]

[2alt. Parties shall collaborate through the conference of parties to establish a multilateral system for managing vaccine related liabilities during pandemic with the aim of assisting developing counties including with regard to individuals who are in a humanitarian setting or vulnerable situation to timely access to vaccine without any barrier. (AF GROUP + EGY)]

[3. Each Party shall endeavor to ensure that in contracts for the supply or purchase of novel pandemic vaccine indemnification clauses in favour of manufacturers, if any, are exceptionally provided and are time-bound. (EU)]

(DEL ART 15 BRA, ECU, IND, MYS) (RETAIN ART 15 NOR, CAN) (RESERVE NGA, IRN)]

Article 16. International collaboration and cooperation

1. The Parties shall collaborate and cooperate in global coordinated actions, with WHO and other relevant international organizations, as well as among themselves, in pandemic prevention, preparedness and response, and in the implementation of this Agreement.

1. The Parties [shall (DEL USA)] [, to the extent possible, (AF GROUP + EGY, BGD)] [intend to (USA)], as appropriate, (QAT, SAU)] collaborate and cooperate in global coordinated actions [in accordance with the principles mentioned in Article 3 (AF GROUP + EGY, BGD)], with WHO [and (DEL EU)] [with other United Nations entities and (PSE, SYR, TUN)] other relevant international organizations [in compliance with FENSA (CHN)], [and stakeholders (EU)] as well as among themselves, in pandemic prevention, preparedness and response, and in the implementation of this Agreement [taking into account the principles in Article 3 (BGD, ZAF)].

2. The Parties shall:

2. The Parties [shall (~~USA~~)] [intend to (USA)]:

(a) promote global, regional and national political commitment, coordination and leadership for pandemic prevention, preparedness and response;

(a) promote global, regional and national political [commitment, coordination and (~~AF GROUP + EGY, BGD~~)] [leadership (~~RESERVE MEX~~)] for pandemic prevention, preparedness and response [at all times (PSE, EM REGION, SYR)];

[2(a)bis. Develop and implement policies for pandemic prevention, preparedness and response that respect, protect and fulfil the human rights of all people and that are in full compliance with international human rights law (EU, CRI)]

(b) ensure that policy decisions are science- and evidence-based;

[(b) ensure that policy decisions are science- [and (~~BGD, MYS, ZAF, AF GROUP + EGY, IDN~~)] [, (~~BGD, MYS, ZAF, IDN~~)] evidence- [and equity- (~~BGD, MYS, AF GROUP + EGY, IDN~~)] [based (~~CAN~~)] [informed (CAN)];

~~(b) (CHN)~~

(c) promote equitable representation as well as equal and meaningful participation in national, regional and global decision-making processes; and

(c) promote equitable [geographical (CHN, BOL)] representation [of women (EU, NOR, CAN, IDN)] [and youth (CAN, IDN, CRI)] as well as [their (EU, NOR, CAN, CRI, BOL)] [broad, independent, diversified and inclusive (BRA, BOL)] equal and meaningful [social (BRA, TUN)] participation in national, regional and global decision-making processes [throughout the policy cycle and at all levels (BRA, BOL)]; and

(d) provide support to countries, upon request, through multilateral and bilateral partnerships that focus on developing capacities for effectively addressing health needs for pandemic prevention, preparedness and response; and develop measures aimed at preventing the stigmatization of, and promoting solidarity with, countries that report public health emergencies.

(d) [to the extent possible (CAN, SGP)] provide support to countries, upon request, through multilateral[, regional (AUS)] and[/or (AF GROUP + EGY, BGD)] bilateral partnerships [mechanisms (AF GROUP + EGY, BGD)] that focus on [technical assistance, (MEX, URY, ECU, CRI, BOL)] developing capacities [and capacity strengthening (MEX, URY, ECU, CRI, BOL)] for effectively addressing health needs for pandemic prevention, preparedness and response; and develop [, in cooperation with WHO, other relevant international organizations and stakeholders and while taking into account the International Health Regulations, (EU)]

measures aimed at [incentivizing transparency and timely reporting while (AF GROUP + EGY, BGD)] preventing the stigmatization of, and [retaliation against, and (AF GROUP + EGY, BGD)] promoting solidarity with, countries that report public health emergencies [during pandemics and humanitarian emergency settings (PSE, SYR, EM Region, TUN)].

[(e). Pay particular attention to the public health needs and circumstances of the least developed country Parties and the small island developing states Parties in the implementation of this Agreement. (EU, NZL, SAM) (~~COL, BRA, URY, ECU, CHN, CRI, GTM, SYR, BOL, CHL~~)]

[(f). Promote the use of open science, open sourced, and collaborative and free tools / platforms. (ECU, CRI, CAN)]

[(g). To refrain from promulgating and applying any unilateral economic, financial or trade measures not in accordance with international law and the Charter of the United Nations. (RUS, PSE, NIC, SYR, IRN, VEN, CHN, CUB, BOL) (~~USA, CAN, AUS, UK~~)]

[(h). Develop, as necessary, and implement policies, protect and fulfil the human rights of all people. (AF GROUP + EGY, BGD)]

[(i). Exclude measures taken pursuant to this Agreement from the scope of the dispute settlement provision of various investment protection agreements. (AF GROUP + EGY, BGD)]

[**SUPPORT** Bureau's text ART 16 (CHN, IND, JPN, FJI, ESW, COL, URY, CHL, MWI, ZAF, THA, URY)]

[MERGE 15 with 19 (NOR)]

Article 17. Whole-of-government and whole-of-society approaches

Whole-of-government and whole-of-society approaches [at the national level (AF GROUP + EGY, BGD, SYR)]

1. The Parties are encouraged to adopt whole-of-government and whole-of-society approaches, including to empower and enable community ownership of, and contribution to, community readiness for and resilience to pandemic prevention, preparedness and response.

1. The Parties are encouraged to adopt whole-of-government and whole-of-society approaches [at the national level (AF GROUP + EGY, BGD, SYR)], including to empower and enable community ownership of, and contribution to, community readiness for and resilience to pandemic prevention, preparedness and response.

2. Each Party shall establish or strengthen, and maintain, a national coordination multisectoral body for pandemic prevention, preparedness and response.

2. Each Party[, taking into account its national circumstances and resources available at hand (AF GROUP + EGY, BGD)] [shall (~~USA, CHN~~)] [should, taking into account its national circumstances, (CHN, SYR)] [is urged to (USA)] establish[, (NGA)] [or (~~NGA~~)] strengthen, and[/or (NGA)] maintain, [a national [and, where relevant, regional (EU)] [leadership, (IDN)] [coordination (~~EU, USA~~)] multisectoral [coordination (USA, NGA)] [body (~~EU~~)] (~~QAT~~)] [as necessary (QAT)] [or mechanism (JPN, EU, FIJ, RUS, CHN, NGA)] for pandemic prevention, preparedness and response.

3. Each Party shall, taking into account its national circumstances, promote the effective and meaningful engagement of communities, and other relevant stakeholders, as part of a whole-of-society approach in planning, decision-making, implementation, monitoring and evaluation, and shall also provide effective feedback opportunities.

3. Each Party [shall (~~USA~~)] [intends to (USA)], taking into account its national circumstances, promote the effective[, inclusive (AUS, BRA)] and meaningful [engagement (~~BRA, TUN~~)] [social participation (BRA, TUN)] of communities and other relevant stakeholders, [including through social participation, (EU)] as part of a whole-of-society approach in planning, decision-making, implementation, monitoring and evaluation, [avoiding conflict of interest, (AF GROUP + EGY, BGD, SYR, MYS)] and shall also provide effective feedback opportunities.

[3a. Include pandemic prevention measures based on the One Health Approach in line with the requirement set out under Articles 4 and 5. (EU)]

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

4. Each Party [shall (~~USA~~)] [intends to (USA)] develop [as a supplement to national strategies implementing the IHR (USA)], [regularly update and implement, (EU)] in accordance with [domestic law (EU)] national [and regional (EU)] context, comprehensive [and multisectoral (EU, AUS)] national [and regional (EU)] pandemic prevention, preparedness and response plans [[at all times (PSE, EM REGION)] that address pre-, post- and interpandemic periods that, (~~EU~~)] inter alia:

RETAIN Bureau's text (IDN)

(a) identify and prioritize, as appropriate, populations, based on public health risk and need, for access to pandemic-related products and health services;

(a) identify [and prioritize, as appropriate, (~~USA~~)] [priority (USA)] populations, based on public health risk and need, for [equitable (USA, NGA, MEX)] access to pandemic-related [health (EU)] products and health [care (EGY, IRN) (~~AUS, UK, COL~~)] services[, in particular people who may be in vulnerable situations (AUS)] [including in humanitarian and fragile settings (EU, PSE, EM REGION, COL)];

(b) support the timely and scalable mobilization of the multidisciplinary surge capacity of human and financial resources, and facilitate the timely allocation of resources to the frontline pandemic response;

(b) support the timely[, equitable (PHL)] [and (DEL PHL)] [, (PHL)] scalable mobilization[, and allocation (PHL)] of the [multidisciplinary surge capacity of (DEL PHL)] human[, technological, (PHL)] and financial resources, and facilitate [the timely allocation of resources to (DEL PHL)] [for (PHL)] the frontline pandemic response [and needed priority medical care services and capacities (RUS, TUN)];

(c) review the status of stockpiles and the surge capacity of essential public health and clinical resources, and surge capacity in the production of pandemic-related products;

(c) review the status of stockpiles and the surge capacity [in the provision (PHL)] of essential public health [functions (PHL)] [and medical care (RUS, TUN)] [and clinical resources, and surge capacity (DEL PHL)] in the production of pandemic-related products;

[(c)alt. Facilitate the timely allocation resources to the frontline of pandemic response (EU)]

(d) facilitate the rapid and equitable restoration of public health capacities and routine and essential health services during and following a pandemic; and

(d) facilitate the rapid and equitable [restoration (DEL IND)] [recovery (IND)] of [public (DEL PHL)] health [system (PHL)] capacities [and routine (DEL PHL)] and essential health [care (EGY, IRN, NGA) (DEL AUS, UK, COL)] services [including mental health and psychosocial support (IND, ECU, MEX)] [during and following [a (DEL PSE, SYR)] pandemic[s (PSE, SYR)] (DEL PHL)] [and humanitarian emergency settings (PSE)]; and

[bis. Protect the safety and wellbeing of health and care workers and other essential workers, including transport workers (EU)]

(e) promote collaboration with relevant stakeholders, including the private sector and civil society, avoiding all forms of conflicts of interest, in a transparent manner.

(e) promote collaboration with relevant stakeholders, including the private sector[, (CAN, BRA)] [and (DEL CAN, BRA)] [academic institutions (EU)] civil society [and Indigenous Peoples (CAN, BRA, COL, CAN, GTM, BOL)] [and local communities (IDN)], [while (EU)] [[avoiding all forms of (DEL UK)] [while managing (UK)] conflicts of interest, (DEL PHL)] [and ensuring (EU)] [in a (DEL EU)] transparen[t (DEL EU)] [cy (EU)] [and accountable (PHL)] manner [and avoiding conflicts of interest (PHL)].

[SUPPORT Bureau's text for (e) (IDN)]

5. Each Party, based on national capacities, shall take the necessary steps to address the social, environmental and economic determinants of health and shall work to prevent or mitigate the socioeconomic impacts of pandemics.

5. Each Party, based on national capacities [and common but differentiated responsibilities (AF GROUP + EGY, SYR, MYS)], [shall (DEL USA)] [is encouraged to (USA)] take the necessary steps to address the social, environmental and economic determinants of health and [shall (DEL USA)] [intends to (USA)] work to prevent or mitigate the socioeconomic impacts of pandemics.

6. Each Party shall take appropriate measures to strengthen national public health and social policies to facilitate a rapid, resilient response to pandemics, especially for persons in vulnerable situations, including by mobilizing social capital in communities for mutual support.

6. Each Party [shall (DEL USA)] [intends to (USA)] take appropriate measures to strengthen national public health and social policies to facilitate a rapid, resilient response to pandemics, especially for persons in vulnerable situations, [[including by mobilizing [social capital (DEL EU)] [support of civil society and local (EU)] [in (DEL EU)] communities [for mutual support (DEL EU) (DEL USA)]]].

Article 18. Communication and public awareness

1. Each Party shall promote timely access to credible and evidence-based information on pandemics and their causes, effects and drivers, with the aim of countering and addressing misinformation or disinformation, particularly through risk communication and effective community-level engagement.

1. Each Party shall promote timely access to [credible (DEL USA, EU, QAT)] [transparent and accurate (EU)] [science (USA, AUS, QAT, CAN)] and evidence-[based (DEL CAN)] [informed (CAN, AUS)] information on pandemics [emergencies and other public health emergencies (EU)] and their causes, [effects (DEL CHN, BGD)] [impacts (CHN, BGD)] and drivers, [as well as on the efficacy and safety of pandemic-related health products (EU)] with the aim of [countering and (DEL USA)] addressing misinformation or disinformation, particularly through risk communication and effective community-level engagement.

2. The Parties shall, as appropriate, promote and/or conduct research and inform policies on factors that hinder or strengthen adherence to public health and social measures in a pandemic, as well as trust in science and public health institutions and agencies.

2. The Parties shall, as appropriate, promote and[or (DEL EU)] conduct research [and (DEL EU)] [to (EU)] inform policies on factors that hinder or strengthen adherence to public health and social

measures in a pandemic, as well as trust in science and public health institutions[, authorities (USA)] and agencies.

3. The Parties shall promote and apply science- and evidence-based approaches to effective and timely risk assessment, and culturally appropriate public communications.

3. The Parties shall promote and apply science- [including social and behavioral science (EU)] and evidence-[based (DEL CAN)] [informed (CAN)] approaches [and strengthen the use of information technology (PHL)] [to (DEL PHL)] [for (PHL)] effective and timely [risk assessment, and culturally appropriate public communications (DEL USA)] [and culturally appropriate communications (USA)].

4. The Parties shall exchange information and cooperate, in accordance with national law, in preventing misinformation and disinformation, and endeavour to develop best practices to increase the accuracy and reliability of crisis communications.

4. The Parties shall exchange information and cooperate, in accordance with [national (DEL USA, EU)] [domestic (EU)] [applicable (USA)] law, in [preventing (DEL USA)] [addressing (USA)] misinformation and disinformation, and endeavour to develop best practices to increase the accuracy and reliability of crisis [and public health (USA)] communications [promote health literacy and develop effective tools to identify and counter misinformation and disinformation (EU)].

[5. The Parties shall promote and facilitate in accordance with domestic law and policy the development and implementation of education and public awareness programs on pandemic and public health emergencies with the participation of all stakeholders, including health professionals, communities and civil society and in a way that is accessible including to persons in vulnerable situations and people living in humanitarian settings. (EU)]

[6. The Parties shall, during pandemics, set aside a fraction of funds, taking into account Articles 19 and 20, for the purpose of addressing misinformation and disinformation, and upon request, shall provide technical and funding support for developing countries toward public awareness campaigns and also undertake other levels of public awareness campaigns to address misinformation and disinformation. (NGA, PSE)]

Article 19. Implementation and support

1. The Parties shall cooperate, directly and/or through relevant regional or international bodies, to sustainably strengthen pandemic prevention, preparedness and response capacities in countries, particularly developing countries, which are Parties to the WHO Pandemic Agreement or the International Health Regulations (2005) (hereinafter referred to collectively as “Cooperating Parties”), taking into account especially the needs of developing countries, while closely coordinating support provided under this Article with the provision of support under the International Health Regulations (2005). Such cooperation shall promote the sharing or transfer of technology and technical, scientific and legal expertise, as well as financial assistance and support for capacity-strengthening to those Cooperating Parties which lack the means and resources to implement the provisions of this Agreement.

1. The Parties shall [undertake to (USA, ISR)] cooperate, [within the means and resources at their disposal, (JPN)] [directly and/or through relevant regional or international [bodies (DEL EU)] [organizations (EU)], (DEL CHN)] to sustainably strengthen pandemic prevention, preparedness and response capacities [in countries, [particularly developing countries, (DEL FJI)] which are Parties to the WHO Pandemic Agreement or the International Health Regulations (2005) (hereinafter referred to collectively as “Cooperating Parties”), (DEL EU)] taking into account especially the needs of developing countries, while closely coordinating support provided under [this Article (DEL EU, UK)] [Articles 19 & 20 (EU, UK)] with the provision of support under the International Health Regulations (2005). Such cooperation [shall (DEL USA, QAT, ISR)] [may (USA, ISR)] promote the sharing or transfer of technology [on voluntary and mutually agreed terms (USA, UK, CHE, AUS, EU, CAN, JPN, UAE, ISR) (DEL IRN, PAK)] and technical, scientific and legal expertise, as well as [financial assistance and support (DEL EU)] for capacity-strengthening to [meets national plans, programs and priorities for (UK)] [those [Cooperating (DEL EU, USA)] Parties which lack the means (DEL QAT)] [Cooperating Parties, particularly those that lack the means (QAT)] and resources to implement the provisions of this Agreement.

2. The Parties shall, upon request, facilitate the provision of technical assistance and support for those Cooperating Parties that have requested such assistance or support, in particular developing countries, either bilaterally or through relevant regional and/or international organizations.

2. The Parties shall [endeavor to (NOR, UK, AUS, QAT)], upon request, [with the help of the Secretariat (EU)] [and subject to available resources and applicable law (USA)] facilitate the provision of technical assistance and support [for those Cooperating Parties (DEL EU)] [to Parties (EU)] that have requested such assistance or support, in particular developing countries, either bilaterally or through relevant regional [and/ (DEL EU)] or international organizations [and taking into account the coordinating mechanism set out in Article 20 (EU)]

[2bis. The extent to which developing country Parties will implement their commitments under this Agreement will depend on the effective implementation by developed country Parties of their commitments under this Article and other related provisions providing assistance to developing countries. (BGD, ZAF, CHN, MYS, IRN, SYR)]

3. The WHO Secretariat supporting the WHO Pandemic Agreement and the International Health Regulations (2005), following the guidance of the governing bodies, in collaboration, as appropriate, with relevant regional and international organizations and other relevant bodies, shall provide assistance to all countries that so request, particularly developing countries, and organize the technical and financial assistance necessary to address such gaps and needs in implementing the commitments agreed upon under the WHO Pandemic Agreement and the International Health Regulations (2005).

3. The [WHO (DEL EU) (RETAIN BOT)] Secretariat [supporting the WHO Pandemic Agreement and the International Health Regulations (2005) (DEL EU)] , following the guidance of the governing bodies, [and (EU)] in collaboration, as appropriate, with relevant regional and international organizations [and other relevant bodies (DEL CHN)], shall provide assistance to [Parties (EU)] [all countries (DEL EU)] that so request, particularly developing countr[ies] [and countries under unilateral economic sanctions (RUS, NIC, SYR, IRN, VEN, CUB, PSE, CHN) (DEL EU)] [Parties

(EU)], [in the identification of support needs in implementing the commitments under this Agreement (EU)] and organize the technical [and (DEL AF GROUP + EGY, BGD)] [, (AF GROUP + EGY, BGD)] financial (DEL NOR)] [technological (AF GROUP + EGY, BGD)] assistance [and [capacity building (AF GROUP + EGY, BGD)]activities provided for in this Article. (EU)] [[necessary (DEL NOR)] [to address [such (DEL AF GROUP + EGY, BGD)] [self-identified (AF GROUP + EGY, BGD)] gaps and needs in implementing the commitments agreed upon under the WHO Pandemic Agreement and the International Health Regulations (2005). (DEL EU)]

[4. The extent to which developing country Parties will effectively implement their commitments, under this Agreement, will depend on the extent of financial and technological resources shared with them. (AF GROUP + EGY, BGD) (DEL EU)]

[5. Where a developing country Party continues to lack the necessary primary health care and hospital care capacities that are resilient to health emergencies, the implementation of provisions relating to surveillance and one health approach shall not be required in a manner that investments will be diverted away from primary health care or hospital care capacities. (BGD, ZAF, CHN, MYS)]

[Support Bureau's text ART 19 (ECU, BRA, URY, SYR, BHS, CHL, MYS, COL, IDN, PAK, FJI, PSE, GTM, HND, BOL, CRI, NIC, VEN)]

Article 20. Sustainable financing

1. The Parties commit to working together to strengthen sustainable financing for health emergencies as well as for pandemic prevention, preparedness and response. In this regard, each Party, within the means and resources at its disposal, shall:

1. The Parties [commit to working together to (DEL USA) [shall (USA)] strengthen sustainable [and predictable (AG + EGY, BGD, MOR, PSE, FJI, SYR, ZAF)] financing for [health emergencies as well as for (DEL UK, USA, CAN, JPN, ISR)] pandemic prevention, preparedness and response [for the implementation of this Agreement (EU, AUS)] [that are within the scope of this Agreement and the IHR (USA, UK, AUS)] [at all times (PSE, EM REGION)]. In this regard, each Party, within the means and resources at its disposal [and subject to applicable law, intends to (USA)], [shall [endeavour to (EU)] (DEL USA):

(a) prioritize and maintain or increase, as necessary, domestic funding for pandemic prevention, preparedness and response, without undermining other domestic public health priorities including for: (i) strengthening and sustaining capacities for the prevention, preparedness and response to health emergencies and pandemics, in particular the core capacities of the International Health Regulations (2005); (ii) implementing national plans, programmes and priorities; and (iii) strengthening health systems resilience;

(a) [prioritize and maintain or increase, as necessary, (DEL UK, USA, CAN)] [support (UK, USA, CAN)] domestic funding for pandemic prevention, preparedness and response, without undermining other domestic public health priorities including for: (i) strengthening and sustaining capacities for [pandemic (UK, CAN)] [the (DEL UK, CAN)] prevention, preparedness and response [to health emergencies and pandemics, (DEL UK, CAN)] in particular the core capacities of the International Health Regulations (2005); (ii) implementing

national plans, programmes and priorities; and (iii) strengthening health systems resilience [and the progressive realization of universal health coverage for pandemic prevention, preparedness and response (UK, JPN)];

(b) mobilize financial resources through all sources, including existing and new bilateral, subregional, regional and multilateral funding mechanisms, to assist in particular developing country Parties, in the implementation of the WHO Pandemic Agreement, including through grants and concessional loans;

(b) Mobilize [additional (AG + EGY, BGD, PSE, SYR, MOR)] financial resources through all sources, including [as a matter of priority (AG + EGY, BGD, PSE, SYR)] [WHO based budget, WHO funding of emergency operations and existing and [existing and new (**DEL** UK, EU, JPN, QAT, ISR)] [relevant (UK, USA, EU, AUS, JPN)] bilateral, subregional, regional and multilateral funding mechanisms [...(EU)] [and prioritize the fund established pursuant to paragraph 4 (AG + EGY, BGD, SYR)], to assist in particular [developing (**DEL** EU) (**RETAIN** COL, URY, ECU, CHN, NIC, ZAF, CRI, BOL, SYR, ARG)] [the least developed (EU) (**DEL** COL, URY, ECU, CHN, NIC, ZAF, CRI, BOL, SYR, ARG)] country Parties [... (EU, USA)], in the implementation of the WHO Pandemic Agreement, including through grants [and concessional loans (**DEL** MEX)];

(c) promote, within relevant bilateral, regional and/or multilateral mechanisms, innovative financing measures, including but not limited to debt relief, based on transparent financial reprogramming plans for pandemic prevention, preparedness, response and recovery of health-system related actions, for affected countries whose debt payment might affect expenditures on pandemic prevention, preparedness and response, and in the case of pandemics, take measures for debt relief, including the suspension of debt servicing and debt cancellation; and

[(c) [[promote (**DEL** USA)] [explore (USA)] (**DEL** AG + EGY, BGD, PSE, SYR) implement)], within relevant bilateral, regional and/or multilateral [funding (USA)] mechanisms, innovative [means of (EU)] financing [. (EU)] [measures, [[including but not limited to debt relief (**DEL** USA, AUS, JPN)], based on transparent financial reprogramming plans for pandemic prevention, preparedness, response and recovery of health system- related actions, for affected countries [whose debt payment (**DEL** USA)] [with fiscal limitations which (USA)] might affect expenditures on pandemic prevention, preparedness and response, [[and in the case of pandemics, take measures for debt relief, including the [automatic (AF GROUP + EGY, BGD, PSE, SYR)] suspension of debt servicing and debt cancellation (**DEL** SAU, QAT)]; and **DEL** (UK, USA, CAN, ROK, NOR) (**RETAIN** PSE, BOL)] (**DEL** EU, AUS)] (**DEL** JPN)] **RETAIN** KEN, PHL)]

(d) encourage governance and operating models of existing financing entities to minimize the burden on countries, offer improved efficiency and coherence at scale, enhance transparency and be responsive to the needs and national priorities of developing countries.

(d) encourage governance and operating models of existing financing entities to minimize the burden on countries, offer improved efficiency and coherence at scale, enhance transparency and be responsive to the needs and national priorities of developing countries [communities and civil society (CAN, UK)]. [, with a particular attention to the needs of the least developed country Parties (EU) (DEL COL, URY, ECU, CHN, NIC, ZAF, CRI, BOL, SYR, ARG)]

2. The governing bodies of the Cooperating Parties shall adopt, every five years a Financial and Implementation Strategy on pandemic prevention, preparedness and response. The Parties, particularly those providing financial support for the strengthening of pandemic prevention, preparedness and response, shall align with the Financial and Implementation Strategy while financing the relevant funding mechanisms, both within and outside WHO.

2. The governing bod[ies (DEL MEX)] [-y (MEX)] of the [WHO Pandemic Agreement (MEX)] [Cooperating Parties (DEL MEX)] shall [adopt (DEL USA, ISR)] [by consensus (EU, JPN)] [undertake to prepare (USA, ISR)], every five years a Financial and Implementation Strategy [of the Pandemic Agreement (UK, ISR)] [on pandemic prevention, preparedness and response (DEL UK, EU, ISR)] [after the approval of the WHO General Programme of Work (MEX)]. The Parties, [[particularly those providing financial support for the strengthening of pandemic prevention, preparedness and response (DEL UK, EU, ISR)], [shall (DEL USA, AUS), ISR] [should endeavour to (USA, AUS, JPN, ISR)] [take into consideration (UK, EU, JPN, NOR, ISR)] [align [subject to applicable law (USA, ISR)] with (DEL UK, JPN, ISR)] the Financial and Implementation Strategy while financing [the implementation of this Agreement (EU)] [[pandemic prevention, preparedness and response capacity building measures (UK, ISR)] [the relevant funding mechanisms, both within and outside WHO (DEL UK, USA, ISR)] (DEL EU)].

3. A Coordinating Financial Mechanism (the “Mechanism”) is hereby established to support the implementation of both the WHO Pandemic Agreement and the International Health Regulations (2005) in a sustainable, predictable, inclusive and transparent manner and accountable to the governing bodies of the Cooperating Parties. The mechanism aims to increase the effectiveness and efficiency of existing and future financial mechanisms, including by providing additional financial resources to strengthen and expand capacities for pandemic prevention, preparedness and response in Cooperating Parties, in particular in developing country Parties.

3. A [Coordinating (DEL AG + EGY, BGD, SYR)] Financial Mechanism (the “Mechanism”) [, functioning under the guidance of the Conference of the Parties (EU, AUS)] is hereby established to support the implementation of both the WHO Pandemic Agreement and the International Health Regulations (2005) in a sustainable, predictable, inclusive and transparent manner [and accountable to the governing bodies of the Cooperating Parties (DEL EU)]. The mechanism aims to increase the effectiveness and efficiency of existing and future financial mechanisms, [. The Conference of the Parties shall at its first session select by consensus one or more existing entities to be entrusted with operation of the coordinating Mechanism. (EU, AUS)] [including by [providing additional financial resources to (DEL USA, UK, JPN)] strengthen[ing (USA, UK)] and expand [ing (USA, UK)] capacities for pandemic prevention, preparedness and response in Cooperating Parties, in particular in developing country Parties [through the fund established in Paragraph 4 (BGD)] (DEL EU)]. [The

Mechanism will be hosted by an entity or entities with pandemic preparedness and financing expertise. (CAN)]

RESERVE (MEX)

4. The Mechanism shall include a pooled fund to provide financing to support, strengthen and expand capacities for pandemic prevention, preparedness and response, and as necessary for day zero surge response, in Cooperating Parties that require financial support. The fund may include sources from monetary contributions received as part of operations of the PABS System, voluntary funds from both States and non-State actors and other contributions to be agreed upon by the Conference of the Parties.

4. [The Mechanism shall include a pooled fund to provide [new/additional (AG + EGY, BGD, SYR)] financing to support, strengthen and expand capacities for pandemic prevention, preparedness and response, and as necessary for day zero surge response, in Cooperating Parties that require financial support. The fund may include sources from monetary contributions received as part of operations of the PABS System, [annual (AG + EGY, BGD, SYR)] [voluntary (**DEL** AG + EGY, BGD, SYR)] funds from [both (**DEL** AG + EGY, BGD, SYR)] States and [voluntary funds from (AG + EGY, BGD, SYR)] non-State actors [in compliance with WHO FENSA (CHN)] [, pledged contributions under financial strategy (AG + EGY, BGD, SYR)] [and other contributions to be agreed upon by the Conference of the Parties (**DEL** SAU, QAT)]. [Parties shall prioritize the requirements of this Fund, while financing for pandemic prevention, preparedness and response. (BGD)] (**DEL** UK, USA, EU, ISR, AUS, QAT, BRN, JPN, CHE)]

5. The Mechanism will also promote harmonization and coordination for financing pandemic prevention, preparedness and response and International Health Regulations related capacities.

5. [The Mechanism [will (**DEL** USA) [shall (USA)] also promote harmonization and coordination for financing pandemic prevention, preparedness and response and International Health Regulations related capacities [and with other funding mechanisms both within and outside WHO (MEX)]. (**DEL** EU)]

6. The Mechanism shall, inter alia:

6. The Mechanism [, through the selected entity or entities entrusted with its operation (EU, AUS)] shall, inter alia:

- (a) identify financing instruments and mechanisms that are available to serve the purposes of pandemic prevention, preparedness and response, and maintain a dashboard of such instruments and related information such as eligibility criteria, modalities and levels of funding available, priorities and process requirements, including financial contributions made by Parties and non-State actors, as applicable, to such instruments, and the funds allocated to countries from such instruments;

(a) Identify [and mobilize all sources of (EU)] financing [instruments and mechanisms (**DEL EU**)] that are available to serve the purposes of [pandemic prevention, preparedness and response, (**DEL EU**)] [supporting the implementation of this Agreement (EU)] and maintain a dashboard of such instruments and related information such as eligibility criteria, modalities and levels of funding available, priorities and process requirements, including financial contributions made by Parties and non-State actors, as applicable, to such instruments, and the funds allocated to countries from such instruments;

(b) establish, as necessary, following a mandate from the Conference of the Parties, working arrangements with relevant identified financing instruments and entities to facilitate their alignment with the Financial and Implementation Strategy;

(b) [seek to (USA)] establish, as necessary, following a mandate from the Conference of the Parties, working arrangements with relevant identified financing instruments and entities [under mutual agreement (JPN)] [[to facilitate their alignment with (**DEL EU**)] [in view of (EU)] the Financial and Implementation Strategy (**DEL UK, USA**)];

(c) provide advice and support, upon request, to Cooperating Parties in identifying and applying in order to obtain access to financial resources in accordance with national pandemic prevention, preparedness and response priorities and identified needs;

(c) provide advice and support, upon request, to [Cooperating (**DEL EU**)] Parties in identifying and applying in order to obtain access to financial resources in accordance with national pandemic prevention, preparedness and response priorities and identified needs;

(d) assess the availability of funds, and support the mobilization of financial resources free from conflict of interest; and

(d) assess the availability of funds, and support the mobilization of financial resources free from conflict of interest; and

(e) conduct relevant analyses on needs and gaps, in addition to tracking cooperation efforts, to inform the development of the Financial and Implementation Strategy, guide Cooperating Parties and recommend course corrections as necessary.

(e) conduct relevant analyses on needs and gaps, in addition to tracking cooperation efforts, to inform [and support strategic decision making by Parties and relevant financing instruments and entities (UK, CAN)] [the development of the Financial and Implementation Strategy, guide Cooperating Parties and recommend course corrections as necessary (**DEL UK, CAN, USA**)].

[f. Report periodically to the Conference of the Parties on the operation of the coordinating Mechanism, including on the use and impact of funds provided. (EU, CAN, AUS, JPN)]

[6bis. All Parties, within their capabilities, shall endeavour to contribute to the funding of the Mechanism. For this purpose, they shall encourage and consider the provision of resources from all sources, including: a) voluntary monetary contributions from Parties; b) voluntary monetary contributions from relevant stakeholders, in particular those active in sectors that benefit from international work to strengthen pandemic prevention, preparedness and response. (EU, CAN, AUS) (~~BRN~~)]

7. The Mechanism, including its fund, shall function under the authority and guidance of the Conference of the Parties and be accountable to it. The Conference of the Parties shall adopt modalities for the operationalization of the Mechanism, including eligibility criteria and the establishment of a governing board of the Mechanism, with balanced representation of WHO regions and developed and developing country Parties, within 12 months after the entry into force of the WHO Pandemic Agreement.

7. The [coordinating (EU)] [Secretariat [of the Mechanism (MEX)], [will submit for the consideration and approval of the Parties (MEX)] [including its fund (~~UK, USA, EU, JPN, CHE, ISR~~)], shall function under the [authority and (~~EU, AUS, USA, ISR~~)] guidance of the Conference of the Parties and be accountable to it [. (EU, AUS)] [[, putting in place conflict of interest policies and operating in a transparent manner (AG + EGY, BGD, UK, SYR)]. The Conference of the Parties shall [identify at its first session an entity or entities to house the Mechanism. The Conference of the Parties and the entity or entities as identified shall agree upon modalities for the Mechanism (UK, CAN)] [adopt modalities for the operationalization of the Mechanism, [including eligibility criteria and the establishment of a governing board of the Mechanism, with balanced representation of WHO regions and developed and developing country Parties (~~USA, ISR~~)], [guided by country priorities in its decision making, (AG + EGY, BGD, SYR)] within 12 months after the entry into force of the WHO Pandemic Agreement (~~UK, CAN, JPN, ISR~~)] (~~EU, AUS, ISR~~).

[7bis. The Conference of the Parties and the entity or entities entrusted with the operation of the coordinating Mechanism shall agree upon arrangements to give effect to the above paragraphs. (EU)]

8. The Conference of the Parties shall periodically review the effectiveness of the Mechanism, such as policies, operational modalities and activities, and its first revision should be carried out no less than two years after its establishment.

8. The Conference of the Parties shall periodically review [the operation and (EU, UK)] the effectiveness of the [coordinating (EU, UK)] Mechanism, [such as (~~EU, UK~~)] [including its (EU, UK)] policies, operational modalities and activities [every (...) years and make any necessary modifications by consensus]. (EU, UK), [and (~~EU, UK~~)] [i (EU, UK)] [i (~~EU, UK~~)] its first revision should be carried out no less than two years after its establishment.

Support Bureau's text (BRA, URY, FJI, BOL, HND, PAK, PSE, CHL, ZAF, GTM, PAN, CRI, BWA, TUN, IRN, MOR, ESW, NGA, GHA, NAM, TZA, KEN, NIC, ETH, ARG, VEN)

NOTE: TZN, BWA, ZAF, ESW, NGA, GHA, EGY, SYR, BRA, NAM, TZA, ETH, NIC: **DEL** all proposals by EU, USA, UK

Chapter III. Institutional and final provisions

Article 21. Conference of the Parties

1. A Conference of the Parties is hereby established.

1. A Conference of the Parties is hereby established.

[*Ibis*. All decisions of the Conference of the Parties shall be taken by consensus unless otherwise specified by articles of this Agreement. (USA, CAN, JPN, ROK)]

[Support Bureau's text (AF GROUP + EGY, MYS, FJI, SYR, BGD, BOL)]

2. The Conference of the Parties shall keep under regular review, every three years, the implementation of the WHO Pandemic Agreement and take the decisions necessary to promote its effective implementation. To this end, it shall:

2. The Conference of the Parties shall keep under regular review [, every three years, (**DEL** USA, AUS, ROK, QAT, UAE)] the implementation of the WHO Pandemic Agreement and take the decisions necessary to promote its effective implementation. To this end, it shall:

(a) consider reports submitted by the Parties in accordance with Article 23 and adopt regular reports on the implementation of the WHO Pandemic Agreement;

(a) consider reports submitted by the [Parties in accordance with Article 23 (**DEL** USA) (**RETAIN** COL)] and adopt regular reports [Implementation and Compliance Committee (USA, UK, NOR, AUS, COL) (**DEL** AF GROUP + EGY, IRN, MYS, SYR, CHN)] on the implementation of the WHO Pandemic Agreement;

(b) oversee any subsidiary bodies, including by establishing their rules of procedure and working modalities;

(b) oversee any subsidiary bodies, including by establishing [by consensus (EU)] their rules of procedure and working modalities;

(c) promote and facilitate the mobilization of financial resources for the implementation of the WHO Pandemic Agreement, in accordance with Article 20;

(c) promote and facilitate the mobilization of financial resources for the implementation of the WHO Pandemic Agreement, in accordance with Article 20;

(d) consider and review developed countries' reports on their contribution to the implementation of the WHO Pandemic Agreement or any other assistance offered towards developing countries and reports submitted by such parties or countries on receiving such offers, their acceptance, rejection or implementation, both submitted pursuant to Article 19 and provide specific recommendations to the parties concerned on enhancing such cooperation and assistance;

(d) [[consider and review developed countries' reports on their contribution to the implementation of the WHO Pandemic Agreement or any other assistance offered towards developing countries and reports submitted by such parties or countries on receiving such offers, their acceptance, rejection or implementation, both submitted pursuant to Article 19 (**RESERVE JPN**)] [and provide specific recommendations to the parties concerned on enhancing such cooperation and assistance (**DEL JPN**) (**RETAIN ZAF**)];

(**DEL 21.2(d)** USA, EU, NOR, ISR) (**RESERVE 21.2(d)** CAN, UK, AUS) (**RETAIN 21.2(d)** KEN, UGA)]

(e) invite, where appropriate in order to strengthen the implementation of the WHO Pandemic Agreement, the services and cooperation of, and information provided by, competent and relevant organizations and bodies of the United Nations system and other international and regional intergovernmental organizations and nongovernmental organizations and bodies;

(e) invite, where appropriate in order to strengthen the implementation of the WHO Pandemic Agreement, the services and cooperation of, and information provided by, competent and relevant organizations and bodies of the United Nations system and other international and regional intergovernmental organizations and nongovernmental organizations and bodies;

(f) promote, including by establishing appropriate processes, cooperation and coordination with and among relevant legal instruments and frameworks and relevant global, regional, subregional and sectoral bodies, with a view to promoting coherence among efforts for pandemic prevention, preparedness and response;

(f) promote, including by establishing appropriate processes, cooperation and coordination with and among relevant legal instruments and frameworks and relevant global, regional, subregional and sectoral bodies [as defined by the COP at its first meeting and to be reviewed at subsequent COPs (AF GROUP + EGY)], with a view to promoting coherence among efforts for pandemic prevention, preparedness and response;

[(f)*bis*. Consider the reports submitted by the relevant institution, and/or Secretariat regarding the implementation of Article 9 to 13, and provide guidance to the such institutions and Parties for the better delivery of equity. (BGD, KEN, ZAF, CHN, DOM, MYS, FJI, IRN, SYR, BOL, IND, MWI, PSE, AG + EGY)]

(g) provide guidance to the WHO Director-General and to Parties, on effective implementation of the WHO Pandemic Agreement including the matters considered in subparagraphs 2(a) and 2(d) of this Article; and

(g) provide guidance to the WHO Director-General and to Parties, on effective implementation of the WHO Pandemic Agreement [[including the matters considered in subparagraph[s (DEL EU)] 2(a) [and 2(d) (DEL EU)] of this Article (DEL USA, AUS)] (DEL NOR)]; and

(h) consider other actions, as appropriate, for the achievement of the objective of the WHO Pandemic Agreement in the light of experience gained in its implementation.

(h) consider other actions, as appropriate, for the achievement of the objective of the WHO Pandemic Agreement in the light of experience gained in its implementation.

[2*bis*. With the aim of promoting the coherence of the Governing Body and the Health Assembly, as well as coherence in respect of relevant instruments and mechanisms within the framework of the World Health Organization, the Conference of the Parties [shall (DEL USA)] [may (USA)] operate [in joint session (USA)] with[in (DEL USA)] a third main committee of the World Health Assembly, subject to the establishment of such a committee by the World Health Assembly. In particular:

(a) decision-making within such a third main committee of the World Health Assembly [will (DEL SGP)] [shall (SGP)] be adjusted, as appropriate, to accommodate the membership of the committee and the Conference of the Parties;

(b) the Conference of the Parties shall operate under the rules of procedure of such a third main committee of the World Health Assembly, provided that the Conference of the Parties may agree [to (DEL SGP)] [and (SGP)] amend, supplement or revise such rules of procedure with a view to facilitating the dispatch of its business, with the aim of facilitating reporting by the Parties and avoiding duplication;

(c) in the event that the States Parties to the International Health Regulations (2005) determine that a Meeting of States Parties under that instrument will also operate within such a third main committee of the World Health Assembly, further [necessary (SGP)] steps [will (DEL SGP)] [shall (SGP)] be agreed[, as necessary, (DEL SGP)] to accommodate, as appropriate, decision-making within such a third main committee of the World Health Assembly; and

(d) in the event that the World Health Assembly does not establish such a third main committee of the World Health Assembly by the date of the entry into force of the WHO

Pandemic Agreement, the Conference of the Parties shall agree on the framework in which the Conference of the Parties shall operate. (USA)

(**DEL 2bis** AF GROUP + EGY, PAK, IRN, MYS, IDN, FJI, QAT, SYR, BOL) (**RESERVE 2bis** DOM, SGP, PHL, ARG)]

[NOTE: Suggest to move Paragraph 2 to the end of ART 21 (TUN)]

3. The first session of the Conference of the Parties shall be convened by the World Health Organization not later than one year after the entry into force of the WHO Pandemic Agreement. The Conference of the Parties will determine the venue and timing of subsequent regular sessions at its first session.

3. The first session of the Conference of the Parties shall be convened by the World Health Organization not later than one year after the entry into force of the WHO Pandemic Agreement. The Conference of the Parties [will (**DEL** USA)] [shall (USA)] determine the venue and timing of subsequent regular sessions at its first session.

4. Extraordinary sessions of the Conference of the Parties shall be held at such other times, as may be deemed necessary by the Conference of the Parties, or at the written request of any Party, provided that, within six months of the request being communicated in writing to the Parties by the Secretariat, it is supported by at least one third of the Parties.

4. Extraordinary sessions of the Conference of the Parties shall be held at such other times, as may be deemed necessary by the Conference of the Parties, or at the written request of any Party, provided that, within six months of the request being communicated in writing to the Parties by the Secretariat, it is supported by at least one third of the Parties. [Such extraordinary sessions may be called at the level of heads of state or government. (EU, NOR)]

[4bis. The COP may periodically [opt (**DEL** SGP)] [decide (SGP)] to request the Director-General dedicate the high-level opening segment of the World Health Assembly to pandemic-related topics and make suitable arrangements to attract and accommodate high-level participation. (USA)]

5. The Conference of the Parties shall adopt by consensus its Rules of Procedure at its first session.

5. The Conference of the Parties shall adopt by consensus [at its first session (USA)] its Rules of Procedure [for matters specific to this agreement not otherwise addressed under the Rules of Procedure of the World Health Assembly (USA)] [at its first session (**DEL** USA)].

[5bis. Organizations, institutions, programs, funds and entities of the United Nations system as well as the World Trade Organization, World Organization for Animal Health, any other relevant international organization as well as any State not Party to the Agreement may be represented at any session of the Conference of the Parties as observers. (EU, CAN, AUS, USA, NOR, NZL)]

(RESERVE COL, DOM) (DEL CHN, IRN, KEN, ZAF, MYS, IDN, FIJ, SYR, AF GROUP + EGY, BGD, PSE)]

[5ter. Any other body or agency, whether national or international, governmental or nongovernmental, including civil society and the private sector which is qualified in areas covered by the Agreement and has requested the Secretariat to participate in sessions of the Conference of the Parties as an observer shall be admitted unless two-thirds of the Parties present object. This provision shall also apply to the admission and participation of observers in subsidiary bodies of the Conference of the Parties (EU, CAN, AUS, USA, ISR, NZL, JPN) (RESERVE COL, DOM, ARG) (DEL PAK, CHN, IRN, KEN, FIJ, ZAF, MYS, IDN, SYR, AF GROUP + EGY, BGD, PSE)]

6. The Conference of the Parties shall establish the criteria for the participation of observers at its proceedings.

6. The Conference of the Parties shall [establish the [criteria for (DEL EU)] (DEL CHN)] [decide (CHN)] [rules applicable to (EU)] the participation of observers [by consensus (CHN, MYS)] at its proceedings.

7. The Conference of the Parties shall by consensus adopt financial rules for itself as well as governing the funding of any subsidiary bodies it may establish as well as financial provisions governing the functioning of the Secretariat. At each ordinary session, it shall adopt a budget for the financial period until the next ordinary session.

[7. The Conference of the Parties shall by consensus adopt financial rules for itself as well as governing the funding of any subsidiary bodies it may establish as well as financial provisions governing the functioning of the Secretariat. At each ordinary session, it shall adopt [, by consensus, (EU)] a budget for the financial period until the next ordinary session.

DEL PARA 7 (USA)]

8. The Conference of the Parties may establish subsidiary bodies, as it deems necessary, and on terms and modalities to be defined by the Conference of the Parties.

8. The Conference of the Parties may establish subsidiary bodies, as it deems necessary, and on terms and modalities to be defined by the Conference of the Parties.

[RETAIN original Bureau's text (IND)]

[Article 21bis. Implementation and Compliance Committee

1. The Parties hereby agree that the Implementation and Compliance Committee of the International Health Regulations will act jointly as the Implementation and Compliance Committee of the WHO

Pandemic Agreement to facilitate and consider the implementation of, and promote compliance with, the provisions of the WHO Pandemic Agreement. The committee shall be facilitative in nature and function in a manner that is transparent, non-adversarial and non-punitive.

2. The Joint Implementation and Compliance Committee shall nominate and elect its members according to the rules of procedure adopted for the Implementation and Compliance Committee of the IHR. The rules of procedure shall determine the requirements for appropriate participation and representation of Parties to this Agreement, with due consideration to gender balance and equitable geographical representation.

3. The Implementation and Compliance Committee shall consider issues of implementation and compliance at the individual and systemic levels, inter alia, and report periodically and make recommendations, as appropriate while cognizant of respective national circumstances, to the Conference of the Parties.

4. In the course of its work, the Implementation and Compliance Committee may draw on appropriate information from any bodies established under the WHO Pandemic Agreement, the International Health Regulations or the WHO, as well as from any information submitted to the WHO through other mechanisms. (COL, AUS, EU, USA, SGP, UK)

(**DEL 21bis** AF GROUP + EGY, CHN)]

Article 22. Right to vote

1. Each Party to the WHO Pandemic Agreement shall have one vote, except as provided for in paragraph 2 of this Article.

1. Each Party to the WHO Pandemic Agreement shall have one vote, except as provided for in paragraph 2 of this Article.

2. A regional economic integration organization that is Party to the WHO Pandemic Agreement, in matters within its competence, shall exercise its right to vote with a number of votes equal to the number of their Member States that are Parties to the WHO Pandemic Agreement. Such a regional economic integration organization shall not exercise its right to vote if any of its Member States exercises its right to vote, and vice versa.

2. A regional economic integration organization that is Party to the WHO Pandemic Agreement, in matters within its competence, shall exercise its right to vote with a number of votes equal to the number of their Member States that are Parties to the WHO Pandemic Agreement [, duly accredited and present during the voting (USA, JPN, UK, CAN, MEX, BRA, COL, KEN, PAK, MOR, CAR, MWI, ESW, AF Group + EGY, CHN, ARG)]. Such a regional economic integration organization shall not exercise its right to vote if any of its Member States exercises its right to vote, and vice versa).

RETAIN Bureau's text (EU)

Article 23. Reports to the Conference of the Parties

1. Each Party shall submit to the Conference of the Parties, through the Secretariat, periodic reports on its implementation of the WHO Pandemic Agreement.

1. Each Party shall [report periodically (NOR, USA)] [submit (~~DEL~~ NOR, USA)] to the Conference of the Parties, through the Secretariat, [periodic reports (~~DEL~~ NOR, USA)] on its implementation of the WHO Pandemic Agreement.

2. The frequency and format of the reports submitted by all Parties shall be determined by the Conference of the Parties.

2. The frequency and format of the reports submitted by all Parties shall be determined by the Conference of the Parties.

3. The Conference of the Parties shall adopt appropriate measures to assist Parties, upon request, in meeting their obligations under this Article, with particular attention to the needs of developing country Parties.

3. The Conference of the Parties [shall (~~DEL~~ USA)] [may (USA)] adopt appropriate measures to assist Parties, upon request, in meeting their obligations under this Article, [including developing country Parties and (EU)] with particular attention to the needs of [developing (~~DEL~~ EU) (**RETAIN** CUB, NIC, SYR, VEN, COL, ARG, ECU, MEX, TUN, DOM, CRI, BRA, HND, IDN, URY, BOL, NAM, MYS, QAT, FJI, NGA, ESW, PSE)] [the least developed (EU) (~~DEL~~ CUB, NIC, SYR, VEN, COL, ARG, ECU, MEX, TUN, DOM, CRI, BRA, HND, IDN, URY, BOL, NAM, MYS, QAT, FJI, NGA, ESW, PSE)] country Parties.

4. The reporting and exchange of information under the WHO Pandemic Agreement shall be subject to national law regarding confidentiality and privacy. The Parties shall protect, as mutually agreed, any confidential information that is exchanged.

4. The reporting and exchange of information under the WHO Pandemic Agreement shall be subject to [national (~~DEL~~ EU) (**RETAIN** KEN, SYR, AF Group + EGY, URY, CHN)] [domestic (EU) (~~DEL~~ KEN, SYR, AF Group + EGY, URY, CHN)] law [regarding confidentiality and privacy (~~DEL~~ USA, UK)]. The Parties shall protect, as mutually agreed, any confidential information that is exchanged.

[NOTE: **RETAIN** October 2023 version: The periodic reports submitted by the Parties shall be made publicly available online by the Secretariat (AF Group + EGY)]

Article 24. Secretariat

1. Secretariat functions for the WHO Pandemic Agreement shall be provided by the WHO Secretariat.

1. Secretariat functions for the WHO Pandemic Agreement shall be provided by the WHO Secretariat. [In performing these functions, the Secretariat shall cooperate, as appropriate, with the FAO, WOA, and UNEP (EU, CAN, AUS) (~~ZMB~~, AG + EGY, BWA, BRA, MYS, TUN, FJI, KEN, TZA, CHN, BGD, ESW, NGA, VEN, NIC)].

Support Bureau's text (AG + EGY, SYR, PSE, MOR, CUB, BRA, MYS, TUN, FJI, TZA, CHN, BGD, CRI, VEN, NIC)

2. Secretariat functions shall be to:

2. Secretariat functions shall be to:

(a) provide technical, administrative and logistic support to the Conference of the Parties and its subsidiary bodies as may be established under the WHO Pandemic Agreement or by the Conference of the Parties for the purpose of the implementation of the WHO Pandemic Agreement;

(a) provide technical, administrative and logistic support to the Conference of the Parties and its subsidiary bodies as may be established under the WHO Pandemic Agreement or by the Conference of the Parties for the purpose of the implementation of the WHO Pandemic Agreement;

(b) make arrangements for the sessions of the Conference of the Parties and its subsidiary bodies and to provide them with services, as required;

(b) make arrangements for the sessions of the Conference of the Parties and its subsidiary bodies and to provide them with services, as required;

(c) transmit reports and other relevant information regarding the implementation of the WHO Pandemic Agreement received by it pursuant to the WHO Pandemic Agreement;

(c) transmit reports and other relevant information regarding the implementation of the WHO Pandemic Agreement received by it pursuant to the WHO Pandemic Agreement;

(d) provide support to the Parties, upon request, particularly developing country Parties, in implementing the WHO Pandemic Agreement, including the compilation and communication of

information required in accordance with the provisions of the WHO Pandemic Agreement or pursuant to requests of the Conference of the Parties;

(d) provide support to the Parties, upon request, particularly developing country Parties, [that are particularly vulnerable to the effects of pandemics (JPN) (~~DEL TUN, CRI~~) (**RESERVE ARG, URY, COL, CUB**)] in implementing the WHO Pandemic Agreement, including the compilation and communication of information required in accordance with the provisions of the WHO Pandemic Agreement or pursuant to requests of the Conference of the Parties;

(e) prepare reports on its activities under the WHO Pandemic Agreement under the guidance of the Conference of the Parties, and to submit them to the Conference of the Parties;

(e) prepare reports on its activities under the WHO Pandemic Agreement under the guidance of the Conference of the Parties, and to submit them to the Conference of the Parties;

(f) ensure, under the guidance of the Conference of the Parties, the necessary coordination with the Secretariats of other competent international organizations, regional intergovernmental organizations, and other bodies;

(f) ensure, under the guidance of the Conference of the Parties, the necessary coordination with the Secretariats of other competent international organizations, regional intergovernmental organizations, and other bodies;

(g) enter, under the guidance of the Conference of the Parties, into such administrative or contractual arrangements as may be required for the effective discharge of its functions; and

(g) enter, under the guidance of the Conference of the Parties, into such administrative or contractual arrangements as may be required for the effective discharge of its functions; and

(h) perform other secretariat functions specified by the WHO Pandemic Agreement and such other functions as may be determined by the Conference of the Parties or assigned to it under the WHO Pandemic Agreement.

(h) enter, under the guidance of the Conference of the Parties, into such administrative or contractual arrangements as may be required for the effective discharge of its functions; and

3. Nothing in the WHO Pandemic Agreement shall be interpreted as providing the WHO Secretariat, including the WHO Director-General, any authority to direct, order, alter or otherwise prescribe the domestic laws or policies of any Party, or to mandate or otherwise impose any requirements that Parties

take specific actions, such as ban or accept travellers, impose vaccination mandates or therapeutic or diagnostic measures, or implement lockdowns.

3. Nothing in the WHO Pandemic Agreement shall be interpreted as providing the WHO [Secretariat (~~NOR, UK~~)], including the WHO Director-General [, the WHO or other body (UK, USA, CAN, CRI)], any authority to direct, order, alter or otherwise prescribe the domestic laws [and regulations (JPN, USA)] or policies of any Party, or to mandate or otherwise impose any requirements that Parties take specific actions [, such as ban or accept travellers, impose vaccination mandates or therapeutic or diagnostic measures, or implement lockdowns (~~NOR, BRN~~) (**RETAIN CRI, UK**)].

Article 25. Settlement of disputes

1. In the event of a dispute between two or more Parties concerning the interpretation or application of the WHO Pandemic Agreement, the Parties concerned shall seek through diplomatic channels a settlement of the dispute through negotiation or any other peaceful means of their own choice, including good offices, mediation or conciliation. Failure to reach a solution by good offices, mediation or conciliation shall not absolve the parties to the dispute from continuing to seek to resolve it.

1. In the event of a dispute between two or more Parties concerning the interpretation or application of the WHO Pandemic Agreement, the Parties concerned shall seek through diplomatic channels a settlement of the dispute through negotiation or any other [peaceful means of their own choice, including good offices (~~ESW~~)], mediation or conciliation. [In case of (CHN, PSE, SYR)] Failure to reach a [solution (~~ESW~~)] [by the methods mentioned above, the Parties may continue to seek solutions to the dispute through joint consultations. (CHN, PSE, SYR)] [[settlement (ESW)] by good offices, mediation or conciliation shall not [absolve (~~ESW~~)] [deter (ESW)] the parties to the dispute from continuing to seek to resolve it (~~CHN, PSE, SYR~~)] [including if they so agree by resorting to ad hoc arbitration in accordance with the Permanent Court of Arbitration Rules 2012 or successor rules. The Parties that have agreed to arbitration shall accept the arbitration award as binding and final. (EU, UK)].

2. When ratifying, accepting, approving, formally confirming or acceding to the WHO Pandemic Agreement, or at any time thereafter, a Party may declare in writing to the Depositary that, for a dispute not resolved in accordance with paragraph 1 of this Article, it accepts, as compulsory ad hoc arbitration in accordance with the Permanent Court of Arbitration Rules of 2012.

[2. When ratifying, accepting, approving, formally confirming or acceding to the WHO Pandemic Agreement, or at any time thereafter, a [Party (~~CAN~~)] [State or regional economic integration organization (CAN)] may declare in writing to the Depositary that, for a dispute not resolved in accordance with paragraph 1 of this Article, it accepts, [in relation to any Party accepting the same obligation, (CHN, PSE, SYR, CUB)] as compulsory ad hoc arbitration in accordance with the Permanent Court of Arbitration Rules [of 2012 (~~JPN~~) (**RESERVE SGP**)] (~~para 2 EU, UK~~)].

3. The provisions of this Article shall apply with respect to any protocol as between the Parties to the protocol, unless otherwise provided therein.

3. The provisions of this Article shall apply with respect to any protocol as between the Parties to the protocol, unless otherwise provided therein.

Article 26. Relationship with other international agreements and instruments

1. The interpretation and application of the WHO Pandemic Agreement shall be guided by the Charter of the United Nations and the Constitution of the World Health Organization.

1. The interpretation and application of the WHO Pandemic Agreement shall be guided by the Charter of the United Nations and the Constitution of the World Health Organization.

NOTE: Suggest to move to Art 3 (EU)

RETAIN Bureau's text for paragraphs 1 and 2 (CHN, NUC)

2. The Parties recognize that the WHO Pandemic Agreement and the International Health Regulations should be interpreted so as to be compatible.

2. The Parties recognize that the WHO Pandemic Agreement and the International Health Regulations [2005 (IRN)] should be interpreted so as to be compatible [and mutually reinforcing (ESW, BWA), MOR].

NOTE: Suggest to reflect this provision in amended IHR (AG + EGY)

3. The provisions of the WHO Pandemic Agreement shall not affect the rights and obligations of any Party under other legally binding international instruments to which it is party.

[3. The provisions of the WHO Pandemic Agreement shall not affect the rights and obligations of any Party under other legally binding international instruments to which it is party. **RESERVE** (ARG, QAT)]

Article 27. Reservations

1. Reservations may be made to the WHO Pandemic Agreement unless incompatible with the object and purpose of the WHO Pandemic Agreement.

1. Reservations may be made to the WHO Pandemic Agreement [except on articles Article XX, Article YY, or Article ZZ (AG + EGY, URY, IDN, SYR)] [unless incompatible with the object and purpose of the WHO Pandemic Agreement (**DEL** AG + EGY, URY, IDN, SYR)].

[Alt1. There shall be no reservations to the WHO Pandemic Agreement (ESW) (**DEL** NZL)].

SUPPORT Bureau's text: JPN

2. Notwithstanding paragraph 1 of this Article, no reservation may be made to Article XX, Article YY, or Article ZZ of the WHO Pandemic Agreement.

[2. Notwithstanding paragraph 1 of this Article, no reservation may be made to Article XX, Article YY, or Article ZZ of the WHO Pandemic Agreement. (~~DEL AG + EGY, URY, IDN, SYR~~)]

SUPPORT Bureau's text: JPN, TUN

RESERVE for whole article 27 (EU)

Article 28. Declarations and statements

1. Article 27 does not preclude a State or regional economic integration organization, when signing, ratifying, approving, accepting or acceding to the WHO Pandemic Agreement, from making declarations or statements, however phrased or named, with a view, inter alia, to the harmonization of its laws and regulations with the provisions of the WHO Pandemic Agreement, provided that such declarations or statements do not purport to exclude or to modify the legal effect of the provisions of the WHO Pandemic Agreement in their application to that State or regional economic integration organization.

1. Article 27 does not preclude a State or regional economic integration organization, when signing, ratifying, approving, accepting or acceding to the WHO Pandemic Agreement, from making declarations or statements, however phrased or named, with a view, inter alia, to the harmonization of its laws and regulations with the provisions of the WHO Pandemic Agreement, provided that such declarations or statements do not purport to exclude or to modify the legal effect of the provisions of the WHO Pandemic Agreement in their application to that State or regional economic integration organization.

2. A declaration or statement made pursuant to this Article shall be circulated by the Depositary to all Parties to the WHO Pandemic Agreement.

2. A declaration or statement made pursuant to this Article shall be circulated by the Depositary to all Parties to the WHO Pandemic Agreement.

Article 29. Amendments

1. Any Party may propose amendments to the WHO Pandemic Agreement, including its annexes and protocols. Such amendments shall be considered by the Conference of the Parties.

1. Any Party may propose amendments to the WHO Pandemic Agreement, including its annexes and protocols. Such amendments shall be considered by the Conference of the Parties.

2. The Conference of the Parties may adopt amendments to the WHO Pandemic Agreement. The text of any proposed amendment to the WHO Pandemic Agreement shall be communicated to the Parties by the Secretariat at least six months before the session at which it is proposed for adoption. The Secretariat shall also communicate proposed amendments to the signatories of the WHO Pandemic Agreement and, for information, to the Depository.

2. The Conference of the Parties may adopt amendments to the WHO Pandemic Agreement. The text of any proposed amendment to the WHO Pandemic Agreement shall be communicated to the Parties by the Secretariat at least six months before the session at which it is proposed for adoption. The Secretariat shall also communicate proposed amendments to the signatories of the WHO Pandemic Agreement and, for information, to the Depository.

3. The Parties shall make every effort to adopt any proposed amendment to the WHO Pandemic Agreement by consensus. If all efforts at consensus have been exhausted and no agreement has been reached, the amendment may as a last resort be adopted by a three-quarters majority vote of the Parties present and voting at the session. For the purposes of this Article, Parties present and voting means Parties present and casting an affirmative or negative vote. Any adopted amendment shall be communicated by the Secretariat to the Depository, which shall circulate it to all Parties for acceptance.

3. The Parties shall make every effort to adopt any proposed amendment to the WHO Pandemic Agreement by consensus. If all efforts at consensus have been exhausted and no agreement has been reached, the amendment may as a last resort be adopted by a three-quarters majority vote of the Parties present and voting at the session. For the purposes of this Article, Parties present and voting means Parties present and casting an affirmative or negative vote. Any adopted amendment shall be communicated by the Secretariat to the Depository, which shall circulate it to all Parties for acceptance.

4. Instruments of acceptance in respect of an amendment shall be deposited with the Depository. An amendment adopted in accordance with paragraph 3 of this Article shall enter into force, for those Parties having accepted it, on the ninetieth day after the date of receipt by the Depository of an instrument of acceptance by at least two thirds of the Parties to the WHO Pandemic Agreement.

4. Instruments of acceptance in respect of an amendment shall be deposited with the Depository. An amendment adopted in accordance with paragraph 3 of this Article shall enter into force, for those Parties having accepted it, on the ninetieth day after the date of receipt by the Depository of an instrument of acceptance by at least two thirds of the Parties to the WHO Pandemic Agreement.

5. An amendment shall enter into force for any other Party on the ninetieth day after the date on which that Party deposits with the Depository its instrument of acceptance of the said amendment.

5. An amendment shall enter into force for any other Party on the ninetieth day after the date on which that Party deposits with the Depository its instrument of acceptance of the said amendment.

RESERVE on whole article 29 (IDN)

Article 30. Annexes

1. Annexes to the WHO Pandemic Agreement shall be proposed, adopted and shall enter into force in accordance with the procedure set forth in Article 29.

1. Annexes to the WHO Pandemic Agreement shall be proposed, adopted and shall enter into force in accordance with the procedure set forth in Article 29.

2. Annexes to the WHO Pandemic Agreement shall form an integral part thereof and, unless otherwise expressly provided, a reference to the WHO Pandemic Agreement constitutes at the same time a reference to any annexes thereto.

2. Annexes to the WHO Pandemic Agreement shall form an integral part thereof and, unless otherwise expressly provided, a reference to the WHO Pandemic Agreement constitutes at the same time a reference to any annexes thereto.

Article 31. Protocols

1. Any Party may propose protocols to the WHO Pandemic Agreement. Such proposals shall be considered by the Conference of the Parties.

1. Any Party may propose protocols to the WHO Pandemic Agreement. Such proposals shall be considered by the Conference of the Parties.

2. The Conference of the Parties may adopt protocols to the WHO Pandemic Agreement. In adopting these protocols, every effort shall be made to reach consensus. If all efforts at consensus have been exhausted and no agreement has been reached, the protocol may as a last resort be adopted by a three quarters majority vote of the Parties present and voting at the session. For the purposes of this Article, Parties present and voting means Parties present and casting an affirmative or negative vote. In the event that a protocol is proposed for adoption under Article 21 of the Constitution of the World Health Organization, it shall further be considered for adoption by the Health Assembly.

2. The Conference of the Parties may adopt protocols to the WHO Pandemic Agreement. In adopting these protocols, every effort shall be made to reach consensus. If all efforts at consensus have been exhausted and no agreement has been reached, the protocol may as a last resort be adopted by a three quarters majority vote of the Parties present and voting at the session. For the purposes of this Article, Parties present and voting means Parties present and casting an affirmative or negative vote. [In the event that a protocol is proposed for adoption under Article 21 of the Constitution of the World

Health Organization, it shall further be considered for adoption by the Health Assembly. (~~JPN~~)
(**RETAIN** BGD)]

3. The text of any proposed protocol shall be communicated to the Parties by the Secretariat at least six months before the session of the Conference of the Parties at which it is proposed for adoption.

3. The text of any proposed protocol shall be communicated to the Parties by the Secretariat at least six months before the session of the Conference of the Parties at which it is proposed for adoption.

4. States that are not Parties to the WHO Pandemic Agreement may be Parties to a protocol, provided the protocol so provides.

4. States that are not Parties to the WHO Pandemic Agreement may be Parties to a protocol, provided the protocol so provides.

[*alt.* Only Parties to the Pandemic Agreement may be Parties to a protocol (CHN, NIC, PRK, VEN, SYR, BLR, CUB)]

[Retain Bureau's text: USA, ESW, BGD, COL]

5. Any protocol to the WHO Pandemic Agreement shall be binding only on the Parties to the protocol in question. Only Parties to a protocol may take decisions on matters exclusively relating to the protocol in question.

5. Any protocol to the WHO Pandemic Agreement shall be binding only on the Parties to the protocol in question. Only Parties to a protocol may take decisions on matters exclusively relating to the protocol in question.

6. The requirements for entry into force of any protocol shall be established by that instrument.

6. The requirements for entry into force of any protocol shall be established by that instrument.

[Support Bureau text for Art 31: BRA, BGD, TUN]

Article 32. Withdrawal

1. At any time after two years from the date on which the WHO Pandemic Agreement has entered into force for a Party, that Party may withdraw from the Agreement by giving written notification to the Depositary.

1. At any time after [two years (**RESERVE** ARG)] from the date on which the WHO Pandemic Agreement has entered into force for a Party, that Party may withdraw from the Agreement by giving written notification to the Depositary.

2. Any such withdrawal shall take effect upon expiry of one year from the date of receipt by the Depository of the notification of withdrawal, or on such later date as may be specified in the notification of withdrawal.

2. Any such withdrawal shall take effect upon expiry of one year from the date of receipt by the Depository of the notification of withdrawal, or on such later date as may be specified in the notification of withdrawal.

3. A State shall not be discharged by reason of the withdrawal from the obligations which accrued while it was a Party to the WHO Pandemic Agreement, nor shall the withdrawal affect any right, obligation or legal situation of that State created through the execution of this Agreement prior to its termination for that State.

[3. A State shall not be discharged by reason of the withdrawal from the obligations which accrued while it was a Party to the WHO Pandemic Agreement, nor shall the withdrawal affect any right, obligation or legal situation of that State created through the execution of this Agreement prior to its termination for that State.

(DEL PARA 3 USA, UK, ROK) (RETAIN AF GROUP + EGY, IND, BGD, SYR, NIC)]

4. Any Party that withdraws from the WHO Pandemic Agreement shall be considered as also having withdrawn from any protocol to which it is a Party, unless the said protocol requires its Parties to formally withdraw in accordance with its relevant terms.

[4. Any Party that withdraws from the WHO Pandemic Agreement shall be considered as also having withdrawn from any protocol to which it is a Party, unless the said protocol requires its Parties to formally withdraw in accordance with its relevant terms. **(RESERVE RUS) (DEL USA)]**

[NOTE revert to text in NT Art 27 (RUS)]

Article 33. Signature

1.

This Agreement shall be open for signature by all States, and by regional economic integration organizations.

1. This Agreement shall be open for signature by all [States **(DEL CHN, PSE, NIC, VEN, BLR, SYR, CUB, PRK, IRN, EGY, ZAF, MWI, SAU, QAT, TUN, BOL, UAE, IDN, MYS) (RETAIN USA)]** [Members of the World Health Organization and any States that are not Members of the World Health Organization but are Members or non-Member Observer States of the United Nations (CHN, PSE, NIC, VEN, BLR, SYR, CUB, PRK, IRN, EGY, ZAF, MWI, SAU, QAT, TUN, BOL, UAE, IDN, MYS) **(DEL USA)]**, and by regional economic integration organizations.

Support Bureau's text (ESW, NZL, UK, SAM)

2.

This Agreement shall be open for signature at the World Health Organization headquarters in Geneva, following its adoption by the World Health Assembly at its Seventy-seventh session, from XX May 2024 to XX June 2024, and thereafter at United Nations Headquarters in New York, from XX June 2024 to XX June 2025.

2. This Agreement shall be open for signature at the World Health Organization headquarters in Geneva, following its adoption by the World Health Assembly at its Seventy-seventh session, from XX May 2024 to XX June 2024, and thereafter at United Nations Headquarters in New York, from XX June 2024 to XX June 2025.

Article 34. Ratification, acceptance, approval, formal confirmation or accession

1. The WHO Pandemic Agreement shall be subject to ratification, acceptance, approval or accession by all States and to formal confirmation or accession by regional economic integration organizations. This Agreement shall be open for accession from the day after the date on which the Agreement is closed for signature. Instruments of ratification, acceptance, approval, formal confirmation or accession shall be deposited with the Depositary.

1. The WHO Pandemic Agreement shall be subject to ratification, acceptance, approval or accession by all States and to formal confirmation or accession by regional economic integration organizations. This Agreement[, and any protocol thereto (EU)] shall be open for accession from the day after the date on which the Agreement is closed for signature. Instruments of ratification, acceptance, approval, formal confirmation or accession shall be deposited with the Depositary.

2. Any regional economic integration organization that becomes a Party to the WHO Pandemic Agreement, without any of its Member States being a Party shall be bound by all the obligations under the WHO Pandemic Agreement. In the case of those regional economic integration organizations for which one or more of its Member States is a Party to the WHO Pandemic Agreement, the regional economic integration organization and its Member States shall decide on their respective responsibilities for the performance of their obligations under the Agreement. In such cases, the regional economic integration organization and its Member States shall not be entitled to exercise rights under the WHO Pandemic Agreement concurrently.

2. Any regional economic integration organization that becomes a Party to the WHO Pandemic Agreement, without any of its Member States being a Party shall be bound by all the obligations under the WHO Pandemic Agreement [or any protocol thereto (EU)]. In the case of those regional economic integration organizations for which one or more of its Member States is a Party to the WHO Pandemic Agreement, the regional economic integration organization and its Member States shall decide on their respective responsibilities for the performance of their obligations under the Agreement. In such

cases, the regional economic integration organization and its Member States shall not be entitled to exercise rights under the WHO Pandemic Agreement concurrently.

3. Regional economic integration organizations shall, in their instruments relating to formal confirmation or in their instruments of accession, declare the extent of their competence with respect to the matters governed by the WHO Pandemic Agreement. These organizations shall also inform the Depository, who shall in turn inform the Parties, of any substantial modification in the extent of their competence.

3. Regional economic integration organizations shall, in their instruments relating to formal confirmation or in their instruments of accession, declare the extent of their competence with respect to the matters governed by the WHO Pandemic Agreement [and any protocol thereto (EU)]. These organizations shall also inform the Depository, who shall in turn inform the Parties, of any substantial modification in the extent of their competence.

Article 35. Entry into force

1. This Agreement shall enter into force on the thirtieth day following the date of deposit of the fortieth instrument of ratification, acceptance, approval, formal confirmation or accession with the Depository.

1. This Agreement shall enter into force on the thirtieth day following the date of deposit of the [fortieth (~~DEL COL, NOR, BRA, TUN, IDN, USA, CAN, MYS, UK, SYR, IND~~)] [sixtieth (COL, NOR, BRA, TUN, IDN, USA, CAN, MYS, UK, SYR, IND)] instrument of ratification, acceptance, approval, formal confirmation or accession with the Depository.

2. For each State that ratifies, accepts or approves the WHO Pandemic Agreement or accedes thereto after the conditions set forth in paragraph 1 of this Article for entry into force have been fulfilled, the WHO Pandemic Agreement shall enter into force on the thirtieth day following the date of deposit of its instrument of ratification, acceptance, approval or accession.

2. For each State that ratifies, accepts or approves the WHO Pandemic Agreement or accedes thereto after the conditions set forth in paragraph 1 of this Article for entry into force have been fulfilled, the WHO Pandemic Agreement shall enter into force on the thirtieth day following the date of deposit of its instrument of ratification, acceptance, approval or accession.

3. For each regional economic integration organization depositing an instrument of formal confirmation or an instrument of accession after the conditions set forth in paragraph 1 of this Article for entry into force have been fulfilled, the WHO Pandemic Agreement shall enter into force on the thirtieth day following the date of deposit of its instrument of formal confirmation or of accession.

3. For each regional economic integration organization depositing an instrument of formal confirmation or an instrument of accession after the conditions set forth in paragraph 1 of this Article for entry into force have been fulfilled, the WHO Pandemic Agreement shall enter into force on the thirtieth day following the date of deposit of its instrument of formal confirmation or of accession.

4. For the purposes of this Article, any instrument deposited by a regional economic integration organization shall not be counted as additional to those deposited by Member States of that regional economic integration organization.

4. For the purposes of this Article, any instrument deposited by a regional economic integration organization shall not be counted as additional to those deposited by Member States of that regional economic integration organization.

Article 36. Depositary

The Secretary-General of the United Nations shall be the Depositary of the WHO Pandemic Agreement and amendments thereto and of any protocols and annexes adopted in accordance with the terms of the WHO Pandemic Agreement.

The Secretary-General of the United Nations shall be the Depositary of the WHO Pandemic Agreement and amendments thereto and of any protocols and annexes adopted in accordance with the terms of the WHO Pandemic Agreement.

Article 37. Authentic texts

The original of the WHO Pandemic Agreement, of which the Arabic, Chinese, English, French, Russian and Spanish texts are equally authentic, shall be deposited with the Secretary-General of the United Nations.

The original of the WHO Pandemic Agreement, of which the Arabic, Chinese, English, French, Russian and Spanish texts are equally authentic, shall be deposited with the Secretary-General of the United Nations.

[RESERVE CHAPTER 3: RUS]

= = =