The Intergovernmental Negotiating Body to draft and negotiate a WHO convention, agreement or other international instrument on pandemic prevention, preparedness and response (INB)
Why did WHO’s MS decide to establish a pandemic accord? (1/2)

30 March 2021: joint Op-ed by more than 20 world leaders, EU President Charles Michel, and WHO Director-General Dr Tedros: “COVID-19 shows why united action is needed for more robust international health architecture”

- “No single government or multilateral agency can address this threat alone. . .”
- “Together, we must be better prepared to predict, prevent, detect, assess and effectively respond to pandemics in a highly coordinated fashion.”
- “We are . . . committed to ensuring universal and equitable access to safe, efficacious and affordable vaccines, medicines and diagnostics for this and future pandemics.”
Why did WHO’s MS decide to establish a pandemic accord? (2/2)

December 2021: (Second-ever) WHA Special session, decision SSA2(5): “The World Together”
Establishment of an intergovernmental negotiating body to strengthen pandemic prevention, preparedness and response

• acknowledging the need to address gaps in preventing, preparing for, and responding to health emergencies, including in development and distribution of, and unhindered, timely and equitable access to, medical countermeasures ... as well as strengthening health systems and their resilience with a view to achieving universal health coverage;

• emphasizing the need for a comprehensive and coherent approach to strengthen the global health architecture, and recognizing the commitment of Member States to develop a new instrument for pandemic prevention, preparedness and response with a whole-of-government and whole-of-society approach, prioritizing the need for equity;
Intergovernmental Negotiating Body (INB)

**Mandate:** to draft and negotiate a WHO convention, agreement or other international instrument on pandemic prevention, preparedness and response, with a view to adoption under Article 19, or under other provisions of the WHO Constitution as may be deemed appropriate by INB.

Under the WHO Constitution, the World Health Assembly may:

- Adopt *conventions or agreements*, per Article 19
- Adopt *regulations*, per Article 21
- Make *recommendations*, per Article 23

These instruments can be used together, in combination.

**The INB Bureau** consists of two co-chairs, reflecting a balance of developed and developing countries, and four vice-chairs, one from each of the six WHO regions, per decision SSA2(5):

- **AFR** – Ms Precious Matsoso (South Africa), co-chair
- **EUR** – Mr Roland Driece (the Netherlands), co-chair
- **AMR** – Ambassador Tovar da Silva Nunes (Brazil), vice-chair
- **EMR** – Mr Ahmed Salama Soliman (Egypt), vice-chair
- **SEAR** – Dr Viroj Tangcharoensathien (Thailand), vice-chair
- **WPR** – Ambassador Kozo Honsei (Japan), vice-chair
Timeline of the INB

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<th>INB1 (Feb-Jun 2022)</th>
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<th>INB4 &amp; INB5 (Feb &amp; Apr 2023)</th>
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- **INB1**: Election of six-member Bureau, Digital Platform, Public Hearings 1st Round, Draft Consolidated Outline
- **INB2**: Identify provision of the WHO constitution, Regional consultations, Informal Focused Consultations (One Health, IP, Equity, Legal issues), Public Hearings 2nd Round
- **INB3**: Consolidation of inputs (RCs, public hearings, others)
- **INB4 & INB5**: Briefing sessions, INB Drafting Group, Informal, Intersessional Briefings (supply chain, One Health, access to technology, ABS)
- **WHA76**: INB Drafting Group, Compilation text

Regular consultation with, and participation of, Member States and relevant stakeholders (per modalities of engagement A/INB/5/4), as well as WHO internal coordination within HQ and with Regional Offices.
Methodology & Principles

• Member State-led, consensus-based, transparent, inclusive including meaningful engagement with relevant stakeholders, including through:
  ➢ INB digital platform;
  ➢ interventions and written input from during the various sessions of the INB;
  ➢ public hearings organized by the Secretariat to inform the work of the INB;
  ➢ informal focused consultations and intersessional briefings;
  ➢ regional consultations during regional committees and on ad-hoc basis.

• Reference to existing international instruments, including those rooted in the WHO Constitution and from other international organizations and fora, to inform work on certain structural aspects.
Thank you

*With acknowledgement to the colleagues supporting the INB*