



# Join Your Delegation

at the 78<sup>th</sup>  
**World Health  
Assembly**

**| CALL TO ACTION**  
The Pandemic Agreement

UNITE Parliamentarians Network for Global Health

## 1. Background on the World Health Assembly

The World Health Assembly is the decision-making body of the World Health Organization (WHO). It is attended by delegations from 194 Member States and focuses on a specific health agenda. The main functions of the World Health Assembly are to determine the policies of the Organization, appoint the Director-General, supervise financial policies, and review and approve the proposed programme budget. The Health Assembly is held annually in Geneva, Switzerland. The 78th World Health Assembly is being held on 19–27 May 2025. The theme of this year's Health Assembly is: **One World for Health**.

## 2. Introduction: The Pandemic Agreement

Amidst COVID-19, negotiations for a global pandemic agreement began in December 2021 at the Intergovernmental Negotiating Body (INB). After over three years and 13 formal rounds, WHO Member States reached consensus on a draft agreement. It will be **considered for adoption at the 78th World Health Assembly** (19–27 May).

The agreement aims to **strengthen global cooperation in pandemic prevention, preparedness, and response**. It complements the International Health Regulations (IHR) by emphasizing prevention, equitable access to medical products, and improved governance—while reaffirming national sovereignty. The Agreement is definitive in reiterating national sovereignty over all health decisionmaking, e.g., clarifying that WHO cannot impose unilateral measures like lockdowns or border closures.

If adopted, **its success will depend on ratification by each country and effective national implementation**, where policymakers and parliamentarians play a crucial role through legislation, advocacy, budget allocation, and oversight.

## 3. Key priorities for Parliamentarians

The key highlights of the Pandemic Agreement<sup>1</sup>, along with corresponding calls to action for parliamentarians under each priority commitment, are as follows:

### 1. Strengthening pandemic prevention, preparedness and response (PPPR)

*Countries must develop or revise multisectoral national plans for PPPR, focusing on strengthening surveillance, drivers of infectious diseases and emerging and reemerging threats (Article 4) as well as health systems strengthening and resilience with aim to achieving Universal Health Coverage (UHC) (Article 6). Legislators will be expected to develop and review relevant national policies and strategies that reflect a One Health approach (Article 5) allocating funding and ensuring intersectoral coordination to promote human, animal and environmental health. Parliamentarians can play a decisive role monitoring its country preparedness capacity, and periodically assessing the functioning and readiness of, and gaps in, its PPPR capacities (Article 6).*

<sup>1</sup> Pandemic Agreement text reflecting progress up to Wednesday, 16 April 2025

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- Support the development and review of national preparedness plans by ensuring they incorporate multisectoral coordination, particularly under a One Health approach that addresses human, animal, and environmental health, guaranteeing mechanisms in place and functional.
- Advocate for adequate funding to strengthen national health systems, build resilience, and advance Universal Health Coverage.
- Legislate and oversee the implementation of policies that address key drivers of infectious diseases and prepare for emerging and reemerging threats.
- Promote peer-review evaluations, both at technical and political level, to monitor and evaluate national preparedness capacities, including regular parliamentary reviews of gaps and performance in PPPR.

## 2. Health Emergency Workforce Development

*The agreement calls for commitments to develop, strengthen, safeguard, retain, and invest in a multi-disciplinary, skilled domestic health workforce to ensure healthcare systems are sufficiently equipped to respond to the pandemic (Article 7).*

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- Legislate for workforce wellbeing ensuring laws are in place that guarantee safe working conditions, access to mental health support, and continuous training opportunities for all health workers.
- Engage in policy and budget discussions, actively participate in shaping policies and national budgets to ensure that health workforce development and protection are institutionalized and sustainably funded.

## 3. Sustainable local research, production and technology sharing

*The agreement urges countries to strengthen globally inclusive R&D capacities, promote research collaboration and rapid data sharing (Article 9); ensure equitable and timely access to pandemic-related health products through scaled-up, geographically diverse production (Article 10); and support technology transfer, licensing, and capacity building in developing countries under mutually agreed terms (Article 11).*

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- Champion inclusive R&D investment, by promoting national funding and legislation that strengthen research and development capacities, particularly through global collaboration and open data sharing.
- Legislate for equitable access, by supporting and forwarding laws and policies that ensure timely and fair access to pandemic-related health products by promoting local and regional manufacturing capabilities.
- Promote technology solidarity, by pushing for frameworks that facilitate technology transfer, transparent licensing, and capacity building in low- and middle-income countries under fair and mutually agreed terms.
- Hold governments accountable – Ensure oversight mechanisms are in place to monitor implementation of international commitments under Articles 9,

10 and 11 (Research and Development; Sustainable and Equitable Access to Health Products; Transfer of Technology and Know-How).

- Parliamentarians could encourage national legislation that facilitates public-private partnerships, fair licensing practices, and the use of TRIPS flexibilities.
- Parliamentarians and policymakers would be important to ensure legal and financial clarity, and for local and foreign firms to engage in voluntary tech transfer.

#### 4. Pathogen Access and Benefit-Sharing (PABS)

*A key element of the draft agreement is a "pathogen access and benefit sharing" (PABS) system, which allows pharmaceutical companies access to scientific data, such as pathogen samples and genomic sequences, in exchange for more equitable sharing of drugs, vaccines, and diagnostics during a pandemic. As per the agreement, manufacturers must commit to providing up to 20% of real-time production to WHO—10% donated, 10% at affordable cost (**Article 12**).*

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- Parliamentarians must ensure that countries align their national laws for effective implementation of the agreement.
- Support equitable access mechanisms, by endorsing legislation and international agreements that ensure fair distribution of vaccines, medicines, and diagnostics during pandemics through systems like the Pathogen Access and Benefit Sharing (PABS) mechanism.
- Strengthen oversight and preparedness by demanding robust mechanisms to monitor compliance and ensure that shared pathogen data translates into fair access to the tools developed from it.
- They could ensure participation in global PABS systems while safeguarding data sovereignty and intellectual property rights.

#### 5. Regulation, Procurement and Supply Chains

*The draft agreement proposes a **Global Supply Chain and Logistics (GSCL) Network** to coordinate the international supply of pandemic-related health products (vaccines, diagnostics, treatments, and PPE) to ensure equitable, timely, and affordable access, especially in low-resource settings (**Article 13**). It also calls for transparency in procurement contracts and discourages overstocking to prevent market disruptions during emergencies (**Article 13 bis**). It promotes regulatory systems strengthening to guarantee quality and safety in products (**Article 14**).*

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- Advance transparency and equity in procurement by promoting procurement policies that prioritize transparency (e.g., publishing contract terms) and embed equitable access provisions—such as donations, licensing, and delivery guarantees.
- Promote responsible stockpiling and global solidarity, if needed, by legislating against excessive national stockpiling and promote predictable, needs-based contributions to international and regional stockpiles, ensuring timely access and rational use of pandemic products globally.

- Oversee and push for investment in regulatory capacity to ensure rapid, safe, and quality-assured approval of pandemic products, including emergency use authorizations and vigilance mechanisms.
- Promote the adoption of regulatory reliance and alignment with international standards.

## 6. Governance, stakeholders and Financial Sustainability

*The agreement encourages countries to adopt whole-of-government and whole-of-society approaches by establishing inclusive national coordination mechanisms, empowering communities, and integrating social protection to build resilience to pandemics (Article 17). It calls for strengthened public health communication and pandemic literacy through timely, science-based information and effective community engagement, especially during health emergencies (Article 18). It also emphasizes the importance of international cooperation to support implementation facilitated by WHO and relevant partners (Article 19). It urges for new national and international financing mechanisms with a focus on surge capacity and support for LMICs and a Coordinating Financial Mechanism to align funding and address capacity gaps (Article 20). It also calls for member states to establish a Conference of the Parties (COP) to oversee implementation, and encourages periodic reporting by countries, which Parliaments can use for oversight (Article 21).*

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- Promote public trust through transparent communication by championing policies that enhance science-based public health messaging, pandemic literacy, and meaningful community engagement, especially during crises.
- Ensure accountability and sustainable financing by supporting regular reviews of the Agreement's implementation and financing, including national and international mechanisms, surge funding for LMICs, and a Coordinating Financial Mechanism to address capacity gaps. Parliamentarians should advocate for inclusion in national delegations to the Conference of the Parties (COP) and promote innovative reporting tools to hold governments accountable.
- Leverage parliamentary oversight and global cooperation by using reporting obligations under the COP to monitor national commitments and by fostering international collaboration aligned with WHO-led implementation support.

## 4. Conclusion: Why it matters for Parliamentarians

The WHO Pandemic Agreement marks a historic milestone. If adopted at the 78<sup>th</sup> World Health Assembly, it will serve as a powerful legal instrument not only improving national capacities, but also reaffirming multilateralism and global solidarity. Its success, however, will rely on sustained political will—parliamentarians have a critical role in translating global commitments into national action. As implementation takes place at the country level, their leadership in ratification, legislation, resource allocation, and oversight are essential.

**UNITE urges parliamentarians to join their national delegations to WHA78, champion the adoption of the agreement, and lead its implementation.**