





PRESS RELEASE

Pandemic Treaty Negotiations: Perpetuating COVID-19 Failure?

Geneva, 12th March 2024

The Society for International Development (SID) and Wemos, members of the independent civil society platform Geneva Global Health Hub (G2H2), convened a press conference today to renew attention on key aspects of financing and governance related to the ongoing World Health Organization (WHO) negotiation on a pandemic treaty.

Over the course of its two-year tenure, substantial resources in terms of time and finances have been invested for the Intergovernmental Negotiating Body (INB) appointed by the WHO to formulate a new binding global treaty for addressing pandemics – the pandemic treaty. The proclaimed purpose of this diplomatic process, with its impending deadline set for May 2024, is to prevent and prepare for another COVID-19-like catastrophe focusing on surveillance structures and on biomedical solutions as the primary – and very limited – approach.

With the negotiation window rapidly narrowing and substantial ground yet to be covered towards achieving a substantive agreement, the opportunity of establishing normative standards that truly enhance equity in global public health hangs in the balance.

The latest revised draft text developed by the INB Bureau was circulated last 8th March. It provides the textual rationale for the final round of negotiations starting on 18th March (INB 9). The circulation of the latest text prompted G2H2 members to hold a press conference on 12th March. There, experts outlined <u>substantial concerns already anticipated and raised</u> in previous reports, emphasizing financial justice as an essential ingredient to face new potential pandemic crises. Responding to the growing apprehension that the trajectory of the treaty may set a worrisome precedent, the event shed light on questionable developments that could easily emerge in the remaining 10 days of uncertain negotiations lingering ahead.

Financialization of health: a catalyst for worsening health inequalities

In recent years, a highly financialized health industry has emerged, primarily serving the interests of large private entities – both corporate and philanthropic – wielding significant influence over policy directions and health solutions. This disproportionate dominance has led to neglecting health promotion, to over-reliance on biomedical solutions, fragmentation, inadequate governance, and lack of accountability. Conditions that have left many underserved, even before the onset of the COVID-19. The pandemic has thus exacerbated already existing inequities in global health, including financing – a scenario that calls for urgent comprehensive remedies.

"Contrary to the WHO Framework Convention on Tobacco Control, the treaty text opened for the final negotiations stubbornly ignores the repeated calls for legal safeguards that are indispensable to immunize the treaty implementation and financing from vested corporate interests", highlights Nicoletta Dentico from Society for International Development. "The opposite is happening: public and private initiatives are given unprecedented legitimacy in the new binding framework. These multistakeholder partnerships are legal entities of private jurisdiction: weaving them in the new normative instrument marks a governance step in the wrong direction".

Advancing financial justice for global health: priorities for the pandemic treaty

Addressing global financial injustice is crucial to ensuring fair and effective collaboration in combating global health crises. "COVID-19 was not just a health issue. It had enormous socio-economic implications. The pandemic treaty should serve as a catalyst for raising awareness about the need for financial reforms to expand countries' fiscal space, regardless of their socio-economic status", as Mariska Meurs of Wemos clarifies. "However, the draft pandemic treaty text worryingly includes 'innovative financing mechanisms', which often means using public funds not for heath, but to attract private-for-profit investors. Instead, the pandemic treaty should embrace the most obvious and fair avenues for funding pandemic prevention, preparedness and response: global tax justice and debt cancellation".

In their remarks, the panelists articulated a collective vision for the pandemic treaty, emphasizing the imperative of establishing a robust and sustainable financing mechanism aimed at the treaty implementation that should incorporate country ownership, funding coherency, overcoming fragmentation, transparency, power dynamics, and anti-corruption clauses.

Guest speaker Prof. Garrett Wallace Brown, from the University of Leeds, remarked: "Current proposals for financing within the pandemic agreement look to be entrenching business as usual and thus remain unsuitable to generate financing that is fit-for-purpose, proportional, equitable and sustainable. In particular, the current overreliance on traditional voluntary contributions and the 'silver bullet' of innovative financing will not be sufficient", he explains.

The press conference stands as a renovated call for a system that upholds principles of global health justice, equity, accountability and solidarity in the treaty, including protection from vested interests. As negotiators enter the new and last phase before the World Health Assembly, it is crucial to address financing shortcomings and prioritize solutions benefiting all member states.

ENDS

Eye catching figures

Debt cancellation: the Copernican rethinking needed for more and better finance

- According to the IMF, since 2010 the financial debt of emerging and low-income countries has risen by 60% points of GDP to a historic 170% of GDP in 2019.
- IMF calculates that in low-income countries debt increased from 58% to 65% between 2021 and 2019.
- The UN counts 54 low-income countries with severe debt problems that spend far more on debt interests than on health.
- According to the World Bank estimates, an additional 75-95 million people are being pushed into extreme poverty by the end of 2022.
- According to the NGO Debt Justice, 41 countries with highest debt payments will spend an average 3% less on essential public services in 2023 than in 2019.
- If the G20 had canceled all external debts due in 2020 alone by 76 lowest income countries, this would have liberated US \$ 40 billion, and US \$ 300 billion if the cancellation had included 2021.
- In 2008, the first systematic global analysis of the richest countries' ecological debt calculated the environmental damage caused to low-income nations to be higher than the entire debt of such countries, then valued at US\$ 1.8 trillion.
- High-income countries, and the corporations they harbor, have accumulated an immense wealth of nearly US\$ 192 trillion through atmospheric appropriation, according to a <u>study</u> published by Nature in June 2023. It is impossible to neglect this scenario.

Stopping the bleeding of illicit financial flows and global tax abuses

- Evidence suggests that the Eastern and Southern African region lost a staggering US\$7.6 billion in tax revenue in 2017 alone, i.e. US\$124.7 per capita, due to only two sources of IFFs.
- According to UNCTAD, countries with high IFFs spend on average 25% less on health and around 50% less on education.

Media resources

- Eye catching figures
- Slides shared during the event
- Speakers Bio
- Recording of the press briefing

About Us

The Society for International Development (SID) is an international network of individuals and organizations founded in 1957 to promote socio-economic justice and foster democratic participation in the development process.

Website: sidint.org

Founded in 1979 in the Netherlands, Wemos is a non-profit organization that works to advocate structural change to achieve global health justice.

Website: wemos.org

The Geneva Global Health Hub (G2H2) is a Geneva based independent platform of around 50 civil society organizations working on global public health and advocating for a democratic global health governance. Website: g2h2.org

Contact Us

For interviews with the speakers, quotes and other media requests please reach out to us.

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