



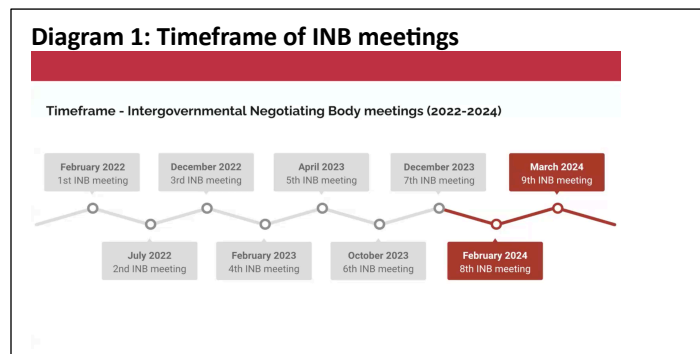
THE PANDEMIC ACCORD: WHAT DOES THIS MEAN FOR OUR COMMUNITIES OF PEOPLE WHO USE AND INJECT DRUGS?

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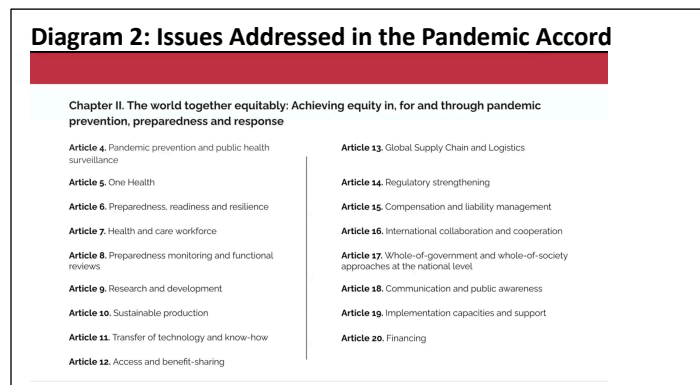
On January 16, 2024, INPUD held a webinar to discuss pandemic prevention, preparedness and response (PPPR), the WHO-led Pandemic Accord developments, and what this all means for country-level communities of people who use and inject drugs. This information brief summarizes the salient issues discussed during the webinar as well as key messages and action steps for ongoing engagement and advocacy.

What is the Pandemic Accord?

In light of the extreme inequalities and massive complex social, economic and political challenges that ensued as a result of COVID-19, in 2021, WHO's 194 Member States established a process to draft and negotiate a new global convention, agreement, or instrument (i.e., an Accord or Treaty) to prevent, prepare for and improve future responses to global health emergencies.^{1 2} International agreements, such as the Pandemic Accord (sometimes referred to as the Pandemic Treaty), serve an important role in holding countries accountable for transparently and collaboratively solving problems that are global in nature, transcending national borders.³ An intergovernmental negotiating board (INB) was created to help facilitate Member State input into the draft document before it is to be adopted at the [World Health Assembly](#) in May 2024.⁴ A “zero draft” of the accord was released in February 2023.



Thousands of inputs have been received since the beginning of this process from civil society organizations and individuals to advance critical priorities for the Accord. However, it has not always been clear how the inputs received from civil society have been integrated into or have influenced the discussions of Member States at the seven (7) INB meetings held in 2022-233 (Diagram 1). The Pandemic Accord is a critical instrument in the global health landscape and would take



¹ <https://www.who.int/news-room/questions-and-answers/item/pandemic-prevention--preparedness-and-response-accord>

² <https://unfoundation.org/blog/post/the-pandemic-accord-explained-what-countries-are-doing-to-protect-against-future-global-health-emergencies/>

³ <https://unfoundation.org/blog/post/the-pandemic-accord-explained-what-countries-are-doing-to-protect-against-future-global-health-emergencies/>

⁴ <https://unfoundation.org/what-we-do/issues/global-health/debunking-pandemic-accord-mis-and-disinformation/>



precedence over the non-binding [UN High Level Political Declaration on PPPR](#) that was endorsed by Member States in September 2023.

Key Issues

Following a series of working drafts, there is now a [text](#) (Diagram 2) that has formed the basis for Member State negotiations in the 7th INB sessions. Governments from low and middle income countries (LMICs) and civil society and community advocates have raised significant criticisms about the draft text. Key concerns include:

- Weak provisions on equitable access to medicines, vaccines and other countermeasures;
- The contesting of time-bound waivers of intellectual property rights to accelerate the scale-up of manufacturing of pandemic-related products;
- Absence of clear commitments to ensuring universally accessible and affordable services, medicines and pandemic-related health commodities during health emergencies;
- The lack of clear financing commitments at global and country-level for sustainable PPPR and One Health approaches;
- Roll-backs on human rights language and Member State commitments to protect and promote human rights and fundamental freedoms during health emergencies, particularly of people in vulnerable situations;
- Diminished explicit recognition of community-led and community-based service providers as key partners in the text as well as within governance and decision-making bodies;
- Weak accountability measures for Member State governments, beyond accountability to the Conference of Parties.⁵

It is clear that while there has been an extensive series of INB meetings running into 2024, intense Member State negotiations are happening now. **STRONG, UNITED COMMUNITY AND CIVIL SOCIETY ADVOCACY IS MORE IMPORTANT NOW THAN EVER AT COUNTRY AND GLOBAL LEVEL.**

Key Messages to Use in Your Advocacy

What we know:

- Pandemics begin and end in communities – communities are where early detection happens⁶ and communities know how best to reach those who are the most vulnerable with the services they need. Community-led networks and peer-based services are crucial elements of effective, sustainable PPPR;
- Communities are experts in crafting and delivering effective health communications, developing, collecting and analysing community data sets, protecting and advancing human

⁵ Within the Pandemic Accord, it is proposed to establish a Conference of Parties representing delegates of the Parties endorsing the Accord (Article 21.1).

⁶ https://apps.who.int/gb/inb/pdf_files/inb4/A_INB4_3-en.pdf Article 16.1.



rights, and generating program innovations to ensure equitable access to health services for all even in the most difficult of public health crises;

- Communities must be meaningfully engaged in governance and decision making at national and global levels for policies, programming and the allocation of resources.

What we've seen:

- The impact of pandemics exacerbate the risks and vulnerability of people who use drugs to: loss of income and livelihoods, unstable or overcrowded housing, homelessness, increased exposure to stigma and discrimination, rights violations, policing, surveillance, violence, including gender-based and intimate partner violence⁷;
- Barriers to health care access were unprecedented during COVID-19. For people living with HIV, affected by TB, or hepatitis C, health service disruptions and lack of access to medicines and health commodities, including personal protective equipment such as sterile face masks, can be disastrous.

It's Never Too Late to Engage – So What Next?

1. **Reach out to your government representatives and policymakers** by phone and email (emails are important to refer back to when needed). Request an in-person meeting. Share your opinions on what should be prioritized in the final Pandemic Accord and push for consultations with civil society and affected communities.
2. **Reach out to your WHO county or regional office(s)** and let them know you want to be engaged in the discussions. Find out the meeting schedule of key dates, locations, and agenda topics.
3. **Write, write, write** – write as much as you can: opinion pieces, blogs, and statements that can be shared with your government and WHO representatives and other national and international community and civil society partners. Sharing these with your partners means more opportunity for others to also write with similar messages.
4. **Power in numbers:** Meet with other civil society and community-led organizations who are like minded and are (wanting to) participating in these discussions. Consider having these partners join your meetings with WHO and government officials. There is strength, safety and solidarity in numbers.

Helpful websites

INPUD- <https://inpud.net>

Harm Reduction International- <https://hri.global>

Global Fund Advocates Network (GFAN): <https://www.globalfundadvocatesnetwork.org>

Pandemic Action Network (PAN): <https://www.pandemicactionnetwork.org>

Health Policy Watch: <https://healthpolicy-watch.news>

World Health Organization (Pandemic Accord page): <https://www.who.int/news-room/questions-and-answers/item/pandemic-prevention--preparedness-and-response-accord>

⁷ https://inpud.net/wp-content/uploads/2023/03/000796_INP_Pandemic-preparedness_v8.pdf