

Dear Member State representatives,

We are writing as members of the Coalition of Advocates for Global Health and Pandemic Preparedness, a group advocating for an integrated and holistic approach to preparedness that emphasizes equity, inclusion, and synergies of multiple global health programs in advancing preparedness. We are writing to express our views as civil society organizations on the path that the draft UN Declaration on PPPR is taking and call on you to retain strong language and rectify extant issues before the text is finalized.

We are very pleased with the inclusion of OP39 as written in Rev. 2 and ask that you push to retain it in the final draft. The responses to HIV/AIDS, tuberculosis, and malaria provide a wealth of experience from which to draw in designing future pandemic responses, have existing infrastructure that can be utilized in an emergency (or expanded to build capacity), and have strong existing networks of health workforce professionals and community leaders that are well-poised to build the health system trust and inclusion that is necessary to effectively respond to an outbreak. It would be a grave oversight to not use this Declaration to reaffirm our commitment to ending ongoing pandemics and epidemics and to direct Member States and agencies to draw from these responses and leverage what we have to strengthen global preparedness.

We are concerned with the direction of many of the equity pieces. The most recent draft does not include any call for access provisions in public investment agreements or details on how manufacturing capacity can be strengthened through licensing and technology transfer. There is also a gap in reference to clinical trial capacity, and we encourage you to support additions of language around ethically conducted clinical research in accordance with Good Participatory Practice (GPP) principles, strengthening capacity to meet international standards and streamline regulatory approval, and the importance of multi-country vaccine trials. Of particular concern is the changes made to the clause on pathogen access and benefits sharing in OP14. The benefits referenced in the rewritten clause are not in the spirit of 'benefits sharing' – as written, this sets up a system where countries are compelled to share data with the hope that others will share just the science of the resulting countermeasure or tool, without the actual product itself. Direct access to any tools resulting from the sharing of pathogens must be

guaranteed, through allocation percentage, purchasing agreements with affordable pricing, or other means.

We welcome the commitment to sustainable financing that provides adequate and predictable funding to the World Health Organization, but call on you to concretely commit additional resources for existing mechanisms such as the Global Fund to Fight AIDS, Tuberculosis, and Malaria (the largest funder of PPPR worldwide through both the C19RM fund and its core funding) and the Pandemic Fund as well as financing mechanisms including but not limited to the WHO Contingency Fund for Emergencies and the IMF Resilience and Sustainability Trust. In order to strengthen financial and investment commitments to support efforts to build, strengthen and sustain capacity for pandemic prevention, preparedness and response, we call for the declaration to recognise and implement the "all contribute, all benefit, all decide" principles of Global Public Investment.

Finally, we also particularly welcome the acknowledgment of community-led health services in PP27, as distinct from community-based services. It is important for this distinction to be recognized in the Declaration.

We are hopeful that the final UN Declaration on PPPR will be ambitious, timely, and in pursuit of a level of equity that has yet to be achieved in global health. With the impacts of a recent global pandemic on our minds, now is not the time to enshrine the status quo of disease for the South and security for the North. We look to you to negotiate a future where countries work in solidarity to prevent, prepare, and respond to pandemic threats and keep us all safe.

Sincerely, African Civil Society Platform for Health Aidsfonds Alliance Nationale Des Communautés Pour La Santé (ANCS) Senegal APCASO AVAC Coordinating Assembly of NGOs (CANGO) Friends of the Global Fight Frontline AIDS Global Fund Advocates Network (GFAN) GNP+ India HIV/AIDS Alliance Khmer HIV/AIDS NGO Alliance (KHANA) Kimirina Mongolian Anti-TB Coalition Pakachere Institute of Health and Development Communication People's Vaccine Alliance Asia (PVA Asia) Results Canada Rumah Cemara SIDC

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