

## **Briefing note on One Health in the Pandemic Accord**

**13 May 2024**

### **What is One Health?**

One Health is a holistic multi-sectoral approach to preventing outbreaks of zoonotic diseases (any disease or infection that can spread between animals and humans) and identifying the root causes and drivers of outbreaks. One Health recognizes the interlinkages and interdependence between the health of people, animals, and the environment. One Health highlights the importance of multi-sectoral and multi-disciplinary engagement, especially community engagement, in tackling health and ecosystem threats to secure future generations' well-being and sustainability. Human activity can result in the spillover of disease from animals to humans and subsequent human-human transmission. Animal trade, farming, and encroachment into areas previously uninhabited by humans can and have created conditions for new diseases to emerge in humans.

### **What is the current status of the One Health discussion in the Pandemic Accord?**

Between the October 2023 and March 2024 drafts of the Pandemic Accord, there were significant changes on One Health. While the section is likely to change again, in the March draft, instead of committing parties to 'implement' a One Health approach, parties are now asked to 'promote' a One Health approach, suggesting ongoing disagreements over language and accountability. Several elements tied to One Health (the how) overlap with measures to prevent diseases and have been captured in Article 4 on prevention (the what).

### **What are the main areas of contention on One Health in the treaty negotiations?**

The main concerns on One Health are related to how burdensome the implementation of proposed obligations will be, specifically measures related to surveillance. As long as the scope of surveillance and with whom surveillance data is shared is unclear in the legal text, it will remain an area of concern. It has also been argued that countries do not have adequate funding, resources, and a skilled workforce to mount the type of multisectoral effort needed to fully operationalize the treaty provisions. Reference to the provision of financial and technical support is made in both Articles 4 & 5 and regular reporting under Article 20 on funding gaps can enable member states who do not have resources to report on funding needs and gaps.

Other criticisms of the current draft text include a stronger focus on detection versus prevention by tackling the drivers of outbreaks; that there is little detail on how international collaboration would prevent the spillover of zoonotic diseases from animals to humans that have pandemic potential marked by the deletion of the Quadripartite institutions (WHO, WOA, FAO and UNEP) specialised agencies that can support member states upon their request in developing and implementing One Health strategies; and, a weak commitment to funding One Health efforts.