

## Can we prevent a new global pandemic? | Column

A new pandemic treaty could stimulate global cooperation in two areas: health security and health equity.



This general view shows the Wuhan Institute of Virology in Wuhan, in China's central Hubei province on Feb. 3, 2021, as members of the World Health Organization team investigating the origins of the COVID-19 coronavirus visit the facility. [ HECTOR RETAMAL | Getty Images North America ]

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The World Health Organization has scheduled a special assembly for Nov. 29 to take up the question of a new pandemic prevention treaty. Current International Health Regulations proved woefully inadequate in the face of COVID-19. Can a new treaty help prevent a future infectious disease from again creating a world of confusion, suffering and unbearable deaths?

COVID verified the ways in which health is global. Within 18 months of the appearance of this deadly virus, only 14 countries, out of 195, reported zero cases. Twelve of those 14 were Pacific islands. International cooperation to contain the pandemic immediately broke down. The world's nations competed fiercely for desperately needed Personal Protective Equipment and ventilators. Individual countries pursued conflicting policies regarding face masks, lockdowns, and social distancing. There are now over 5 million deaths from COVID worldwide, with at least 767,000 in the United States.



Dr. William Felice was named the Florida Professor of 2006 by the Carnegie Foundation for the Advancement of Teaching. [ UNKNOWN | Photo: Courtesy ]

During the 2002-3 SARS outbreak and the 2009-10 swine flu pandemic, the WHO played a centralized leadership role in containing these infectious diseases. Yet, after the WHO failed to provide strong leadership during the 2014-15 West African Ebola outbreak, many nations lost faith in the organization. After years of leading nations weakening the WHO, the organization was not in a position in 2020 to exert the leadership needed to contain COVID.

The new international treaty on pandemics is intended to focus on early detection, prevention, equitable access to vaccines, and the strengthening of the WHO as the coordinating authority on global health. Yet, the fear is that the global community will produce a treaty with “no teeth,” which is to say no accountability and no enforcement mechanisms.

However, by drawing on successful examples of global enforcement mechanisms “with teeth,” this new pandemic treaty could stimulate global cooperation in two areas: health security and health equity.

**Health Security:** In the early days of the COVID pandemic, China delayed weeks before confirming a COVID outbreak and initially denied human-to-human transmission. The WHO was powerless to independently confirm data or operate inside a country without permission. The new pandemic treaty could create a rapid and verifiable alert system with data sharing and transparency between nations. Political scientists point to the current nuclear and chemical weapons de-proliferation treaties that establish inspections methods that could be a model for a reinvigorated WHO. Through these treaties, independent scientists inspect chemical and nuclear facilities and verify compliance. Individual nations have learned that it is in their national interest to allow these intrusive measures to protect their national security. The same methods are needed for investigating dangerous pathogens. Some nations, of course, will resist such actions. But, under this new treaty, such reluctance and sabotage could lead to global condemnation and significant pressure on such noncompliant outlier countries.

**Health Equity:** The UN effort at global vaccine distribution, known as COVAX, has failed poor countries. Donations lag far behind what is needed and pressure on drug companies to more fully share their vaccines has produced limited results. High-income countries have been criticized by the WHO for a “catastrophic moral failure” over the allocation of vaccines. Approximately only 0.7 percent of vaccines have gone to low-income countries, while nearly half have gone to wealthy countries.

The new pandemic treaty can address this directly by learning from the Paris and Glasgow Climate Change agreements. These agreements call for \$100 billion to be raised each year from the wealthier nations to help poor countries mitigate and adapt to climate change. The new pandemic treaty can embrace a similar commitment to fund and distribute future medicines and vaccines for suffering countries. We know from former President George W. Bush's global campaign to combat the HIV/AIDS epidemic (PEPFAR) that such mobilization of resources can significantly impact global health. PEPFAR has provided about \$90 billion in funding for HIV/AIDS treatment and prevention and is estimated to have saved over 20 million lives.

Globalization has had a profound impact on many aspects of life, including health. The massive movements of people across borders — international travelers, refugees, immigrants — combined with new linkages in trade have created new global health vulnerabilities. As influenza, HIV/AIDS, Ebola, smallpox, and COVID demonstrate, health risks emanating from one country can create threats and dangers to populations around the world. A new Pandemic Treaty “with teeth” has the potential to significantly help nations collectively protect global health.

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