

Thank you for your letter to Mr Jakob Forssmed, Minister for Social Affairs. I have been asked to respond.

The COVID-19 pandemic exposed fundamental flaws in global preparedness to respond to large-scale health crises, with far-reaching consequences. For example, valuable time was lost before the world was alerted, many countries were unprepared despite clear warning signs, and many reacted too late. In addition to the impact of the virus on morbidity and mortality, the pandemic also had major negative effects on countries' health systems and on societies as a whole. The lack of coordination likely exacerbated the crisis, while the impact on the economy and trade affected the health of many.

The COVID-19 pandemic has shown how health threats risk paralysing entire societies. It is not a question of if but when the next pandemic will strike. To prevent the next health threat from developing into the same global crisis as the COVID-19 pandemic, our collective ability to prevent health threats and be well prepared needs to be strengthened.

The WHO is the UN's specialised agency for health, tasked with leading and coordinating international health efforts, issuing standards and guidelines, and providing science-based support to Member State governments to implement the best possible health policies. It is also tasked with acting as a coordinating force for global health.

Pandemics are global and require international cooperation. The WHO plays a key role in international efforts in pandemic preparedness and response. The WHO is the UN body mandated to bring together the world's health ministers. This is why the countries of the world came together at the WHO to decide on a mandate to negotiate a global pandemic treaty and to launch a review of the International Health Regulations (IHR).

The IHR are a legally binding framework negotiated by WHO member states. The aim is to prevent, deter and manage cross-border health threats with the least possible impact on international trade and traffic. The IHR are based on national and international cooperation to detect and limit the spread of infectious diseases and substances that may pose an international threat to human health as early as possible, both within Sweden and across borders with other countries. The IHR covers all serious health threats, including chemical, biological and radionuclear (CBRN) threats as well as health threats of environmental or unknown origin, regardless of whether they are spread intentionally or unintentionally. In Sweden, the IHR have been implemented by the Act (2006:1570) on protection against international health threats, which entered into force on 15 June 2007 (see Government Bill 2005/06:215). The most recent amendment to the Act entered into force on 1 January 2020 and was prompted by a change in the designation of municipalities at regional level from county councils to regions.

The purpose of a Global Pandemic Treaty and the revision of the International Health Regulations (IHR) is to make all countries in the world safer and better prepared for the next pandemic. The aim is not to deprive states of their ability or obligation to act in the event of a pandemic.

The negotiations on a pandemic treaty and the revision of the IHR are not intended to establish a new global organisation, to limit the ability or obligation of Sweden or other states to respond to a health crisis, or to grant powers to the WHO at the expense of Member States.

The government's objective of the negotiations is to establish an appropriate international regulatory framework that can strengthen the multilateral community's ability to prevent and manage pandemics. The aim is also to contribute to good national, regional and global preparedness and capacity to respond to pandemics. This is to avoid outbreaks developing into serious crises that risk paralysing societies, such as the COVID-19 pandemic.

The Swedish position is that the current regulatory framework is largely good, and that non-compliance among countries is a major problem. The pandemic has illustrated the importance of all countries following the same regulatory framework. The starting point for Sweden is therefore that the purpose and scope of the IHR should not change compared to today, but that shortcomings such as weak follow-up need to be addressed.

Fundamental human rights and freedoms are protected by the Constitution. The IHR will not affect these rights.

All 194 member states have had the opportunity to propose amendments to the IHR; over 300 proposals have been received and far from all of them will be realised. The amendments have been compiled and commented on by the Review Committee regarding Amendments to the IHR ("Review Committee") in a report. The report produced by the Review Committee is an expert report based on the amendments proposed by Member States. The robust report published by the expert group is an important contribution to the negotiations and is available on the WHO website: Report of the Review Committee regarding amendments to the International Health Regulations (2005) ([who.int](https://www.who.int)).

More information on the review of the IHR and the pandemic treaty can be found on the WHO website:

IHR: WHO | Working Group on Amendments to the International Health Regulations (2005)

Pandemic Treaty: WHO | Intergovernmental Negotiating Body

The negotiations on a pandemic treaty and the review of the IHR are multilateral negotiations in which Sweden participates on the same basis as other UN member states and which are carried out in many other subject areas. The Government keeps the Riksdag informed about the issue on an ongoing basis and information about ongoing negotiations is available on the WHO website and elsewhere.

There are as yet no fully negotiated articles or treaties for the government to take a position on. When there are, the Government will take a position on them in the usual way. If parliamentary approval is required for Sweden to conclude the treaty, this will be obtained.

The negotiations will continue until May 2024 when a proposal will be presented to the WHO member states.

With kind regards

Eleonor Johansson  
Correspondence officer  
Ministry of Social Affairs