

From: s 22(1)(a)
To: s 22(1)(a)(ii) ; Easton, Deanna; s 22(1)(a)(ii)
Subject: FW: CABLE - Global health reform: Australia's priorities for new international instrument on pandemic prevention, preparedness, response - Israel [SEC=OFFICIAL]
Date: Monday, 2 May 2022 11:00:07 PM

From: s 47E(d) @dfat.gov.au
Sent: Monday, 2 May 2022 10:59:16 PM (UTC+10:00) Canberra, Melbourne, Sydney
Subject: CABLE - Global health reform: Australia's priorities for new international instrument on pandemic prevention, preparedness, response - Israel [SEC=OFFICIAL]

OFFICIAL

CABLE -
s 22(1)(a)(ii)
s 22(1)(a)(ii)
s 22(1)(a)(ii)

Title: Global health reform: Australia's priorities for new international instrument on pandemic prevention, preparedness, response - Israel
To: Canberra
Cc: Ankara, Bangkok, Berlin, Brasilia, Brussels, Cairo, Geneva UN, Jakarta, London, Mexico City, Ottawa, Paris EMB, Pretoria, Seoul, Singapore, The Hague, Tokyo, Washington, Wellington
From: Tel Aviv Sent by: s 22(1)(a)(ii)
Topics: SOCIAL ISSUES/Health & Ageing, UN & COMMONWEALTH/UN Discussions
Approved By: HOM (Griffiths)
References: s 22(1)(a)(ii)
Response: Routine, Information Only

Annotation:
Summary: Per tasking, Post provided to MFA colleagues a copy of Australia's submission to the Intergovernmental Body. s 33(a)(iii)
The MFA suggested a bilateral meeting between Health and Foreign Affairs counterparts to s 33(a)(iii)
A bilateral meeting at the World Health Assembly in May was also an option. Grateful advice.

Sender: s 33(a)(iii)

Canberra distribution
s 22(1)(a)(ii)

PROTECTED



**The Hon Mark Butler MP
Minister for Health and Aged Care**

Ref No: MS23-900053

Senator the Hon Penny Wong
Minister for Foreign Affairs
Parliament House
CANBERRA ACT 2600

Dear Minister

A handwritten signature in blue ink that reads "Penny".

I write to seek your agreement for Australia to continue negotiations on a new international agreement on pandemic prevention, preparedness and response under the remit of the World Health Organization (WHO), as well as targeted amendments to the International Health Regulations (2005) (IHR).

At the World Health Assembly (WHA) Special Session (29 November to 1 December 2021), WHO Member States agreed to establish an Intergovernmental Negotiating Body (INB) to draft and negotiate a WHO convention, agreement or other international instrument on pandemic prevention, preparedness, and response. The INB subsequently agreed in July 2022 that the new instrument should be legally binding with non-legally binding elements.

Further, at the WHA in May 2022, Member States agreed that a Working Group (WGIHR) would consider proposed targeted amendments to the IHR. The IHR is a legally binding agreement of 196 countries to build the capability to detect and report potential public health emergencies worldwide. IHR require that all countries have the ability to detect, assess, report, and respond to public health events. The two negotiation processes are intended to be coherent and complementary, with the outcomes mandated for submission to the 77th WHA in May 2024. The Departments of Health and Aged Care and Foreign Affairs and Trade have jointly engaged in both negotiation processes.

Following our Government's election, we separately endorsed the existing Australian negotiating mandate and agreed our officials continue negotiations to develop the new instrument. The next year-and-a-half of negotiations on both the instrument and IHR are defining moments for Australia's leadership on a suite of contemporary global health issues. It is a unique opportunity for our Government to showcase leadership in our region and the world stage on this crucial issue for global health.

The INB will commence formal negotiations on a zero draft pandemic agreement at its upcoming fourth meeting (27 February to 3 March 2023). The WGIHR will begin deliberations on proposed amendments to the IHR at its second meeting (20 to 22 February 2023). I seek your agreement to a revised negotiating mandate that will support Australia's negotiating position going forward (refer Attachment 1).

PROTECTED

This version of the mandate has been expanded to cover international negotiations on reforms to the International Health Regulations (2005) (IHR) to ensure Australia's position in respect of the two reform processes are complementary. While the priorities and positions on technical global health issues remain consistent with the previous mandate, the instructions have been broadened to include a more refined whole of government position to support text-based negotiations.

The attached mandate sets out the proposed objectives, principles and priorities for Australia in the negotiations. Our positions remain consistent with the previous mandate for the new instrument, but have been broadened to address the parallel process for targeted amendments to the IHR, and to reflect developments in the negotiations to-date. I propose that Australia actively works to maintain the following priorities, as previously agreed, with a complementary approach maintaining the centrality of the IHR and maximising the opportunities offered by a new legally binding agreement:

- s 47C
- adoption of a One Health approach which recognises the interdependencies between human, animal and environmental health
- strengthened and sustained national, regional and global prevention, preparedness and response capacities
- enhanced sharing of information and materials and associated benefits
- more equitable and timely access to countermeasures for health emergencies
- improved national and global financing for health emergency prevention and preparedness
- effective governance, accountability and compliance.

Australia will continue to work towards a world better prepared for future outbreaks, epidemics and pandemics, prosecuting and promoting our priority reform objectives and protecting our sovereign interests. s 47C

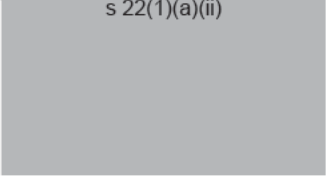
s 33(a)(iii), s 47E(d)

Our Departments have consulted the Departments of Agriculture, Fisheries and Forestry; Attorney-General's; Defence; Environment, Energy, Climate Change and Water; Finance; Home Affairs; Industry, Science and Resources; Prime Minister and Cabinet in the development of this mandate. Our Departments will continue to ensure that all agencies with an interest in the negotiations are appropriately consulted.

I have provided a copy of this letter to the Prime Minister, the Treasurer, the Attorney General; as well as the Ministers for Agriculture, Fisheries and Forestry; Finance; Environment, Energy, Climate Change and Water; Defence; Home Affairs; Industry and Science; Resources and Northern Australia.

Yours sincerely

s 22(1)(a)(ii)



Mark Butler

06 / 07 / 2023

Encl (1) Revised Negotiating Mandate

- cc: The Prime Minister, the Hon Anthony Albanese MP
- The Deputy Prime Minister and Minister for Defence, the Hon Richard Marles MP,
- The Treasurer, the Hon Jim Chalmers MP
- The Attorney General, the Hon Mark Dreyfus KC MP
- Senator the Hon Murray Watt, Minister for Agriculture, Fisheries and Forestry
- The Hon Tanya Plibersek MP, Minister for Environment, Energy, Climate Change and Water
- Senator the Hon Katy Gallagher, Minister for Finance
- The Hon Claire O'Neil MP, Minister for Home Affairs
- The Hon Ed Husic MP, Minister for Industry and Science
- The Hon Madeleine King MP, Minister for Resources and Minister for Northern Australia

s 22(1)(a)(ii)



From: ^{s 47E(d)} @dfat.gov.au
Sent: Friday, 10 March 2023 10:09:40 PM (UTC+10:00) Canberra, Melbourne, Sydney
To: undisclosedrecipients@dfat.gov.au
Subject: Assistant Foreign Minister Watts: Geneva Visit Overview [SEC=PROTECTED]

PROTECTED

CABLE -
s 22(1)(a)(ii)
Post
s 22(1)(a)(ii)

Title: **Assistant Foreign Minister Watts: Geneva Visit Overview**


To: Canberra
Cc: Africa Posts, ASEAN Posts, Commonwealth Posts, East Asia Summit, EU Posts, Pacific Posts, UN New York, Vienna UN

From: Geneva UN
(s 22(1) Sent by: s 22(1)(a)(ii)

Topics s 22(1)(a)(ii)

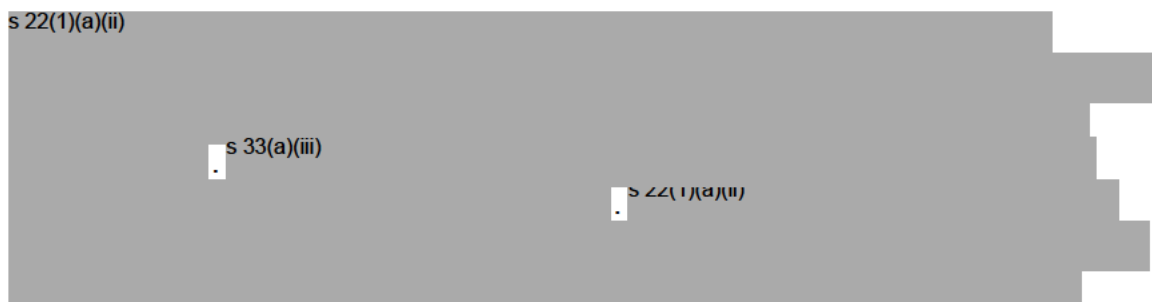
Approved By: AFM/COS/HOM
Response: **Routine, Information Only**

s 22(1)(a)(ii)



Health

s 22(1)(a)(ii)



s 33(a)(iii)

s 22(1)(a)(ii)

Dr Aylward briefed AFM Watts on the parallel processes to improve

global health security through amendments to the *International Health Regulations* and the development of a new pandemic instrument; AFM Watts assured that Australia's constructive engagement would continue in these processes.

s 22(1)(a)(ii)

s 22(1)(a)(ii)

OFFICIAL:Sensitive

s 22(1)(a)(ii)

s 22(1)(a)(ii)

Title: s 22(1)(a)(ii)

MRN: s 22(1)(a)(ii)

To: Bangkok; Beijing; Berlin; Brasilia; Brussels; Cairo; Development Posts; Dhaka; Geneva UN; Geneva WTO; Jakarta; London; Manila; Moscow; New Delhi; Nuku'alofa; Ottawa; Paris EMB; Pretoria; Rome; Seoul; Singapore; Stockholm; Suva; The Hague; Tokyo; UN New York; Vienna UN; Washington; Wellington

Cc:

From: Canberra
(CHCH/DFAT/GHD/CHS)

From File:

EDRMS

Files:

References: s 22(1)(a)(ii)
s 22(1)(a)(ii)

Response: **Routine, Information Only**

Summary

s 22(1)(a)(ii)

s 22(1)(a)(ii)

s 22(1)(a)(ii)

OFFICIAL:Sensitive

s 22(1)(a)(ii)

s 22(1)(a)(ii)

s 22(1)(a)(ii)

s 22(1)(a)(ii)

8. The resumed INB and drafting group meeting took place during a three-month period between negotiation sessions in the parallel *International Health Regulations (2005)* amendment process (s 22(1)(a)(ii)) Interactions between the two processes (including equitable access to countermeasures, access and benefit sharing, compliance and implementation, governance and financing) are due to be discussed at a joint plenary session on 21 and 24 July, crossing over the end of INB6 and beginning of WGIHR4 (24–28 July).

s 22(1)(a)(ii)

Comment

s 22(1)(a)(ii)

s 22(1)(a)(ii)


s 22(1)(a)(ii)

s 22(1)(a)(ii)

text ends

From: s 22(1)(a)
To: s 22(1)(a)(ii)
Subject: FW: Pandemic Instrument and IHR Amendments- FAS IDC on Pandemic Instrument and IHR amendments [SEC=OFFICIAL;Sensitive]
Date: Tuesday, 25 July 2023 10:04:16 AM
Attachments: [image001.png](#)
[Attachment A - INB Bureau text \(May 2023\).pdf](#)
[Attachment B - INB June 2023 - drafting group.docx](#)
[Attachment C - Proposed Amendments to IHR .pdf](#)
[Attachment D - WGIHR April 2023.docx](#)
[Attachment E - Australia's negotiating mandate - WGIHR and INB.pdf](#)
[Attachment F - Interdepartmental Committee - Pandemic treaty and IHR amendments - Terms of Reference - June 2023.pdf](#)

s 22(1)(a)(ii)



From: Lucas de Toca <Lucas.deToca@dfat.gov.au>
Sent: Thursday, 20 July 2023 10:03 AM
To: Jesse.Clarke@ag.gov.au; s 22(1)(a)(ii) <[REDACTED]> @csiro.au; s 22(1)(a)(ii) <[REDACTED]> @aff.gov.au; s 22(1)(a)(ii) <[REDACTED]> @dcceew.gov.au; sarah.sharkey@defence.gov.au; Donna Valenti (External Contact) s 22(1)(a)(ii) <[REDACTED]> @finance.gov.au; Kendra Morony s 22(1)(a)(ii) <[REDACTED]> @homeaffairs.gov.au; s 22(1)(a)(ii) <[REDACTED]> @industry.gov.au; Steel, Lee s 22(1)(a)(ii) <[REDACTED]> @pmc.gov.au; Natasha Smith <Natasha.Smith@dfat.gov.au>; James Baxter <James.Baxter@dfat.gov.au>; Adam Mccarthy <Adam.McCarthy@dfat.gov.au>; Elizabeth Wilde <Elizabeth.Wilde@dfat.gov.au>; s 22(1)(a)(ii) <[REDACTED]> @dfat.gov.au; s 22(1)(a)(ii) <[REDACTED]> @dfat.gov.au; s 22(1)(a)(ii) <[REDACTED]> @dfat.gov.au; zz

[External] § 22(1)(a)(ii) @health.gov.au § 22(1)(a)(ii) @health.gov.au; Phillip Gould
§ 22(1)(a)(ii) @health.gov.au; § 22(1)(a)(ii) @health.gov.au; § 22(1)(a)(ii) @health.gov.au;
§ 22(1)(a)(ii) @health.gov.au; § 22(1)(a)(ii) @health.gov.au;
§ 22(1)(a)(ii) @health.gov.au; § 22(1)(a)(ii) @health.gov.au

Cc: § 22(1)(a)(ii) @health.gov.au; Fleur Davies <Fleur.Davies@dfat.gov.au>; zz [External]
travis.power@health.gov.au <travis.power@health.gov.au>; § 22(1)(a)(ii)
§ 22(1)(a)(ii) @dfat.gov.au; § 22(1)(a)(ii) @health.gov.au; § 22(1)(a)(ii)
§ 22(1)(a)(ii) @dfat.gov.au; § 22(1)(a)(ii) dfat.gov.au;
§ 22(1)(a)(ii) @health.gov.au; § 22(1)(a)(ii) @health.gov.au; § 22(1)(a)(ii)
§ 22(1)(a)(ii) @dfat.gov.au; § 22(1)(a)(ii) @dfat.gov.au; § 22(1)(a)(ii)
§ 22(1)(a)(ii) @dfat.gov.au; § 22(1)(a)(ii) @Health.gov.au; § 22(1)(a)(ii)
@Health.gov.au; § 22(1)(a)(ii) @Health.gov.au; § 22(1)(a)(ii)
§ 22(1)(a)(ii) @dfat.gov.au; § 22(1)(a)(ii) @dfat.gov.au

Subject: Pandemic Instrument and IHR Amendments- FAS IDC on Pandemic Instrument and IHR amendments [SEC=OFFICIAL:Sensitive]

OFFICIAL: Sensitive

Dear colleagues

I am writing to update you on the Government's engagement in the **negotiation of a new international instrument on pandemic prevention, preparedness and response and amendments to the *International Health Regulations (2005) (IHR)***, which are being jointly led by the Commonwealth Departments of Health and Aged Care (DoHAC) and Foreign Affairs and Trade (DFAT).

Since the last FAS level Interdepartmental Committee meeting, there have been leadership changes within both Departments with respect to responsibility for both reform processes. Mary Wood has commenced as First Assistant Secretary of Health Systems Strategy Division at DoHAC and I commenced as First Assistant Secretary of Global Health Division at DFAT in May.

By way of a quick reminder on the processes, an Intergovernmental Negotiating Body (INB) was established to draft and negotiate the pandemic instrument and a Working Group on Amendments to the IHR (WGIHR) was established to consider proposed targeted amendments to the IHR in light of lessons learned from the COVID-19 pandemic. The INB agreed that the pandemic instrument should be legally binding with non-legally binding elements. The IHR is already legally binding on 196 countries and aims to build the capability to detect, assess, report, and respond to public health events. Any amendments to the IHR will be on an opt-out basis. Both processes are expected to deliver agreed outcomes for adoption at the World Health Assembly in May 2024. Australia is actively engaged in both the INB and WGIHR processes.

§ 22(1)(a)(ii)

§ 22(1)(a)(ii)

s 22(1)(a)(ii)

s 22(1)(a)(ii)

IHR amendment negotiations

IHR negotiations have ballooned from a narrow mandate to consider targeted amendments to the IHR to a parallel negotiation on many of the issues discussed in the pandemic instrument, particularly those related to equity. To date, discussions have focussed on the IHR core capacities including surveillance, public health response as well as financial and technical assistance and compliance and accountability. s 33(a)(iii)

s 33(a)(iii)

Next steps

Given the complexity of negotiations and the considerable public interest in these processes, DFAT and DoHAC will be increasing our stakeholder consultation and engagement over the coming months. This includes a public consultation process inviting written submissions via an online portal on DoHAC's website (anticipated to go live in late July, which we'll share in due course), discussions with State and Territory governments, and the continuation of expert and key stakeholder roundtables in September.

-

As you are aware, we are continuing to engage directly with your agencies/areas at the working level to inform Australia's negotiating positions. We consider it timely to bring you all together again in August to discuss the latest developments, the path forward and potential compromises on high priority issues, particularly those which engage the interests of your agencies/areas. We invite you to the next IDC on **Tuesday 8 August from 4-5pm AEST**, a calendar invitation will follow shortly.

For your reference, I have also re-attached Australia's negotiating mandate for the two negotiation processes (please note this is not for distribution), prepared in consultation with

your agencies/areas, as well as the Terms of Reference for the IDC. Please reach out with any questions in the interim.

Kind regards

Dr Lucas de Toca

First Assistant Secretary, Global Health Division, Department of Foreign Affairs and Trade

Mary Wood

First Assistant Secretary, Health Systems Strategy Division, Department of Health and Aged Care

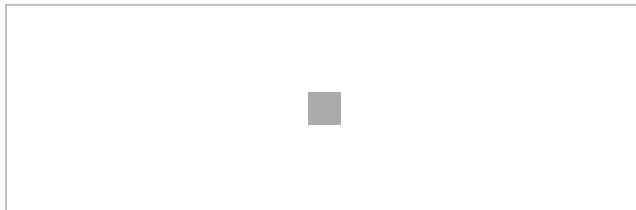
Dr Lucas de Toca PSM MD MPH (he/him)

First Assistant Secretary | Global Health Division
Head | Indo-Pacific Centre for Health Security
Department of Foreign Affairs and Trade
s 22(1)(a)(ii)

Executive Officer: s 22(1)(a)(ii)

Executive Assistant: s 22(1)(a)(ii)

dfat.gov.au | [@CentreHealthSec](https://twitter.com/CentreHealthSec) | [Contain This Podcast](#) | [Facebook](#)



I acknowledge the Traditional Owners of Country throughout Australia, and their continuing connection to land, waters and community. We pay our respects to all First Nations peoples, their cultures and to their Elders, past and present..

s 22(1)(a)(ii)

s 22(1)(a)(ii)

Title: s 22(1)(a)(ii)

MRN: s 22(1)(a)(ii)

To: Bangkok; Beijing; Berlin; Brasilia; Brussels; Cairo; Development Posts; Dhaka; Geneva UN; Geneva WTO; Jakarta; London; Manila; Moscow; New Delhi; Nuku'alofa; Ottawa; Paris EMB; Pretoria; Rome; Seoul; Singapore; Stockholm; Suva; The Hague; Tokyo; UN New York; Vienna UN; Washington; Wellington

Cc:

From: Canberra
(CHCH/DFAT/GHD/CHS)

From File:
EDRMS

Files:

References: s 22(1)(a)(ii)

Response: Routine, Information Only

Summary

s 22(1)(a)(ii)

s 22(1)(a)(ii)

s 22(1)(a)(ii)

s 22(1)(a)(ii)

s 22(1)(a)(ii)

s 22(1)(a)(ii)

s 22(1)(a)(ii)

8. The resumed INB and drafting group meeting took place during a three-month period between negotiation sessions in the parallel *International Health Regulations (2005)* amendment process (s 22(1)(a)(ii)) Interactions between the two processes (including equitable access to countermeasures, access and benefit sharing, compliance and implementation, governance and financing) are due to be discussed at a joint plenary session on 21 and 24 July, crossing over the end of INB6 and beginning of WGIHR4 (24–28 July).

Comment

s 22(1)(a)(ii)

s 22(1)(a)(ii)

s 22(1)(a)(ii)

s 22(1)(a)(ii)

text ends

s 22(1)(a)(ii)

s 22(1)(a)(ii)

Title: WHO: Reforms to the International Health Regulations (2005):
Contentious yet Constructive

MRN: s 22(1)(a)(ii)

To: Bangkok; Beijing; Berlin; Brasilia; Brussels; Cairo; Development Posts;
Dhaka; Geneva UN; Geneva WTO; Jakarta; London; Manila; Moscow; New
Delhi; Nuku'alofa; Paris EMB; Pretoria; Rome; Seoul; Singapore; Stockholm;
Suva; The Hague; UN New York; Vienna UN; Washington; Wellington

Cc:

From: Canberra
(CHCH/HEALTH)

From File:

EDRMS

Files:

References: s 22(1)(a)(ii)

Response: Routine, Information Only

Summary

The third meeting of the Working Group on Amendments to the International Health Regulations commenced detailed negotiations on amendment proposals. s 33(a)(iii)

The third meeting of the Working Group on Amendments to the *International Health Regulation*(WGIHR3), 17–20 April 2023 in Geneva, commenced detailed negotiations on amendment proposals grouped by core themes, as agreed at WGIHR2 [s 22(1)(a)(ii) s 33(a)(iii)

s 33(a)(iii)

s 33(a)(iii)

s 22(1)(a)(ii)

s 22(1)(a)(ii)

s 33(a)(iii)

s 33(a)(iii)

s 33(a)(iii)

6. Detailed negotiations will continue at the fourth meeting of the WGIHR (WGIHR4) scheduled from 24 – 28 July. Amendment proposals will again be grouped by theme with a focus on responsible authorities; notification and verification; the determination of a Public Health Emergency of International Concern; and the Emergency Committee. Proposed amendments to Article 1 (Definitions), Article 2 (Scope and Purpose) and Article 3 (Principles) will continue to be re-visited due to their interaction with other provisions.

7. In the lead-up to WGIHR4, Member State-facilitated informal consultations will continue and be complemented by intersessional work led by the Bureau. Some amendment proponents will also hold ‘facilitated informal consultations’ on provisions requiring further deliberation, with the outcomes of these to be revisited at WGIHR4. Given widespread acknowledgement of points of intersection and overlap between provisions proposed for the pandemic accord and proposed amendments to the IHR, Member States also agreed to a joint session between the INB and WGIHR. An initial process-focused virtual joint session is set for 5 June, with a further, substantive joint session likely to be held in connection with INB6 and WGIHR4, which will be held consecutively from 17–28 July.

Comment

s 33(a)(iii)

s 22(1)(a)(ii)

s 22(1)(a)(ii)

s 33(a)(iii)

s 33(a)(iii)

10. DFAT's Global Health Division was consulted in drafting this cable.

text ends

Sent by: s 22(1)(a)(ii)

Prepared s 22(1)(a)(ii)

by:

Approved s 22(1)(a)(ii)

by:

Topics: s 22(1)(a)(ii)

▼ New Distribution

Canberra distribution

s 22(1)(a)(ii)

NOT FOR CIRCULATION

Australia's Negotiating Mandate (Update 2023): International agreement on pandemic prevention, preparedness, and response and amendments to the *International Health Regulations (2005)*

Australia is committed to strengthening the global health architecture to prevent and respond to future pandemics, building on lessons learned from the COVID-19 pandemic. Negotiation of a new international agreement on pandemic prevention, preparedness and response, alongside targeted amendments to the *International Health Regulations (2005)* (IHR) both under the auspices of the World Health Organization (WHO), is central to this commitment.

Australia considers the agreement and the IHR as complementary instruments, which will form a holistic legal framework to strengthen international governance for pandemic prevention, preparedness and response, and support coherence across the multilateral system.

The IHR are the existing legal framework defining countries' rights and obligations in handling public health events and emergencies that have the potential to cross borders. The purpose and scope of the IHR are to prevent, control and provide a public health response to the international spread of disease in ways that are commensurate with public health risks, and which avoid unnecessary interference with international traffic and trade. All WHO Member States are parties to the IHR and are therefore bound to adhere the obligations therein.

The new agreement is proposed to address additional measures not captured under the IHR. Key areas include development and distribution of medical countermeasures including equitable access, gaps in sharing pathogens and information; financing for capacity building and research and development; embedding a One Health approach¹; and focus on ongoing prevention and preparedness efforts outside of a declared public health emergency of international concern under the IHR². WHO Member States will be required to become signatories to the new agreement and therefore it will likely not have universal membership.

s 33(a)(iii)

A single negotiating mandate consolidates and highlights our common objectives, principles and priorities for negotiations on both instruments.

1. Objectives and Principles


In keeping with the recommendations of independent reviews of the global COVID-19 pandemic response, Australia will seek to shape an agreement and targeted IHR amendments that align with the following objectives and principles:

- s 33(a)(iii)

1 The One Health High Level Expert Panel's (OHHLEP) definition of 'One Health' is an integrated, unifying approach to balance and optimise the health of people, animals and the environment" These are closely linked and inter-dependent and are particularly important to prevent, predict, detect, and respond to global health threats.

2 The *International Health Regulations 2005* define a Public Health Emergency of International Concern (PHEIC) as "an extraordinary event which is determined [by the WHO] to constitute a public health risk to other States through the international spread of disease and to potentially require a coordinated international response".


s 33(a)(iii)



2. Priorities

Throughout negotiations on the new international agreement and targeted IHR amendments, Australia will advance the following priorities:

s 33(a)(iii)



TERMS OF REFERENCE FOR THE INTERDEPARTMENTAL COMMITTEE ON AN INTERNATIONAL PANDEMIC INSTRUMENT AND *INTERNATIONAL HEALTH REGULATIONS (2005)* AMENDMENTS

Purpose

The Interdepartmental Committee (IDC) will support the Australian Government's engagement in the negotiation of a new international instrument on pandemic prevention, preparedness and response (pandemic instrument) as well as amendments to the *International Health Regulations (2005)* (IHR). These parallel processes are due for adoption by the World Health Assembly in May 2024. The IDC will support a co-ordinated, whole-of-government approach to the treaty-making process, ensuring that the Australian Government's negotiation mandates adequately reflect priorities and positions across government. The IDC will be led by the Department of Health and Aged Care and the Department of Foreign Affairs and Trade with representation from portfolios across government whose responsibilities relate to the scope of the pandemic instrument and IHR.

Role

The role of the IDC is to:

- exchange information, provide advice and collaborate on priority issues to inform the Australian Government's engagement in the negotiation of a new pandemic instrument and amendments to the IHR
- bring together agencies, whose mandates may be impacted by the instrument and the amended IHR, or who may have responsibility for implementing provisions of the instrument and IHR, including from areas such as:
 - a) health
 - b) foreign affairs
 - c) legal
 - d) agriculture
 - e) national security
 - f) border control
- support the Department of Health and Aged Care and the Department of Foreign Affairs and Trade, as lead agencies on the pandemic instrument and IHR amendments, to represent and prosecute whole of government positions in negotiations and ensure relevant agencies are kept informed of, and feed into, critical decision points.

Governance

The IDC is established on a time limited basis to guide a whole of government approach to negotiation of the pandemic instrument and IHR amendments ahead of its consideration by the World Health Assembly, due in May 2024. It will meet on an ad hoc basis, at least every six months. The IDC may be extended, post May 2024, if the parallel processes are not completed by this time or there are exigencies concerning the Australian Government's ratification and implementation of the

instrument and amended IHR. The IDC will be convened at the SES Band 2 level and supported by an operational EL2 working group which will engage on a bimonthly basis to provide advice, collaborate and inform negotiating positions on the instrument and IHR amendments. EL2 representatives will be responsible for keeping their respective IDC member informed of major developments out of session.

Membership

The IDC will co-chaired by Department of Health and Aged Care and Department of Foreign Affairs and Trade, with membership spanning the agencies and portfolios outlined below.

Co-Chairs: First Assistant Secretary, Global Health Division, Department of Foreign Affairs and Trade
First Assistant Secretary, Portfolio Strategies Division, Department of Health and Aged Care

Invited Agencies

- Attorney-General's Department
- Commonwealth Scientific and Industrial Research Organisation
- Department of Agriculture, Fisheries and Forestry
- Department of Climate Change, Energy, the Environment and Water
- Department of Defence
- Department of Foreign Affairs and Trade
- Department of Finance
- Department of Health and Aged Care
- Department of Home Affairs
- Department of Industry, Science and Resources
- Department of Prime Minister and Cabinet
- National Health and Medical Research Council

Points of Contact

- Fleur Davies, Assistant Secretary, Multilateral Health Branch, Department of Foreign Affairs and Trade (fleur.davies@dfat.gov.au)
- § 22(1)(a)(ii), Assistant Secretary, International Strategies Branch, Department of Health and Aged Care § 22(1)(a)(ii) ([@health.gov.au](mailto: @health.gov.au))

§ 22(1)(a)(ii)

From: Lucas de Toca <Lucas.deToca@dfat.gov.au>

Sent: Friday, 28 July 2023 3:38 PM

To: Jesse.Clarke@ag.gov.au; § 22(1)(a)(ii) [@csiro.au](mailto:§ 22(1)(a)(ii)@csiro.au); § 22(1)(a)(ii) [@aff.gov.au](mailto:§ 22(1)(a)(ii)@aff.gov.au); sarah.sharkey@defence.gov.au; § 22(1)(a)(ii) (External Contact) [@finance.gov.au](mailto:§ 22(1)(a)(ii)@finance.gov.au); § 22(1)(a)(ii) [@industry.gov.au](mailto:§ 22(1)(a)(ii)@industry.gov.au); Steel, Lee <Lee.Steel@pmc.gov.au>; Natasha Smith <Natasha.Smith@dfat.gov.au>; James Baxter <James.Baxter@dfat.gov.au>; Adam Mccarthy <Adam.McCarthy@dfat.gov.au>; Elizabeth Wilde <Elizabeth.Wilde@dfat.gov.au>; § 22(1)(a)(ii) [@dfat.gov.au](mailto:§ 22(1)(a)(ii)@dfat.gov.au); § 22(1)(a)(ii) [@dfat.gov.au](mailto:§ 22(1)(a)(ii)@dfat.gov.au); § 22(1)(a)(ii) [@dfat.gov.au](mailto:§ 22(1)(a)(ii)@dfat.gov.au); zz [External] § 22(1)(a)(ii) [@health.gov.au](mailto:§ 22(1)(a)(ii)@health.gov.au) § 22(1)(a)(ii) [@health.gov.au](mailto:§ 22(1)(a)(ii)@health.gov.au); § 22(1)(a)(ii) [@health.gov.au](mailto:§ 22(1)(a)(ii)@health.gov.au); § 22(1)(a)(ii) [@health.gov.au](mailto:§ 22(1)(a)(ii)@health.gov.au); § 22(1)(a)(ii) [@health.gov.au](mailto:§ 22(1)(a)(ii)@health.gov.au); § 22(1)(a)(ii) [@health.gov.au](mailto:§ 22(1)(a)(ii)@health.gov.au); § 22(1)(a)(ii) [@health.gov.au](mailto:§ 22(1)(a)(ii)@health.gov.au); Fleur Davies <Fleur.Davies@dfat.gov.au>; zz [External] § 22(1)(a)(ii) [@health.gov.au](mailto:§ 22(1)(a)(ii)@health.gov.au) § 22(1)(a)(ii) [@health.gov.au](mailto:§ 22(1)(a)(ii)@health.gov.au); § 22(1)(a)(ii) [@dfat.gov.au](mailto:§ 22(1)(a)(ii)@dfat.gov.au); § 22(1)(a)(ii) [@health.gov.au](mailto:§ 22(1)(a)(ii)@health.gov.au); § 22(1)(a)(ii) <[§ 22\(1\)\(a\)\(ii\)@dfat.gov.au](mailto:§ 22(1)(a)(ii)@dfat.gov.au)>; § 22(1)(a)(ii) [@health.gov.au](mailto:§ 22(1)(a)(ii)@health.gov.au); § 22(1)(a)(ii) [@nhmrc.gov.au](mailto:§ 22(1)(a)(ii)@nhmrc.gov.au); § 22(1)(a)(ii) [@dfat.gov.au](mailto:§ 22(1)(a)(ii)@dfat.gov.au); zz [External] § 22(1)(a)(ii) [@homeaffairs.gov.au](mailto:§ 22(1)(a)(ii)@homeaffairs.gov.au) § 22(1)(a)(ii) [@homeaffairs.gov.au](mailto:§ 22(1)(a)(ii)@homeaffairs.gov.au); Suzi.Heaton@dcceew.gov.au; § 22(1)(a)(ii) [@health.gov.au](mailto:§ 22(1)(a)(ii)@health.gov.au); Anne.Sheehan@ag.gov.au; zz [External] stephanie.ierino@ag.gov.au <stephanie.ierino@ag.gov.au>; Benjamin.Huntley@ag.gov.au; Michelle.croker@dcceew.gov.au
Cc: § 22(1)(a)(ii) [@health.gov.au](mailto:§ 22(1)(a)(ii)@health.gov.au); § 22(1)(a)(ii) [@health.gov.au](mailto:§ 22(1)(a)(ii)@health.gov.au); § 22(1)(a)(ii) [@dfat.gov.au](mailto:§ 22(1)(a)(ii)@dfat.gov.au); § 22(1)(a)(ii) [@dfat.gov.au](mailto:§ 22(1)(a)(ii)@dfat.gov.au); Nicholas Mezo <Nicholas.Mezo@dfat.gov.au>; § 22(1)(a)(ii) [@Health.gov.au](mailto:§ 22(1)(a)(ii)@Health.gov.au); § 22(1)(a)(ii) [@Health.gov.au](mailto:§ 22(1)(a)(ii)@Health.gov.au); § 22(1)(a)(ii) [@dfat.gov.au](mailto:§ 22(1)(a)(ii)@dfat.gov.au); § 22(1)(a)(ii) [@dfat.gov.au](mailto:§ 22(1)(a)(ii)@dfat.gov.au); § 22(1)(a)(ii) [@health.gov.au](mailto:§ 22(1)(a)(ii)@health.gov.au); § 22(1)(a)(ii) [@dfat.gov.au](mailto:§ 22(1)(a)(ii)@dfat.gov.au); § 22(1)(a)(ii) [@dcceew.gov.au](mailto:§ 22(1)(a)(ii)@dcceew.gov.au); § 47E(d) [@dcceew.gov.au](mailto:§ 47E(d)@dcceew.gov.au)

Subject: Change of date - FAS IDC on Pandemic Instrument and IHR amendments - 9 August [SEC=OFFICIAL:Sensitive]

OFFICIAL: Sensitive

Dear colleagues,

As per previous correspondence, Health and DFAT are planning a second **virtual meeting** of the interdepartmental committee (IDC) on the pandemic instrument and proposed IHR amendments.

s 22(1)(a)(ii)

As you are aware, we are already working directly with your agencies to develop Australia's negotiating position in respect of both negotiation processes. The intention of this meeting is to brief you on the outcomes of negotiations that took place in July and to provide an overview of high priority issues which engage the interests of your agencies. For your reference, please find **attached** Australia's negotiating mandate for the two reform processes.

For further information on the IDC, please refer to the **attached** Terms of Reference.

An agenda will follow in due course via an update to the calendar invitation. Apologies for the rescheduling again.

Cheers

L

Dr Lucas de Toca PSM MD MPH (he/him)

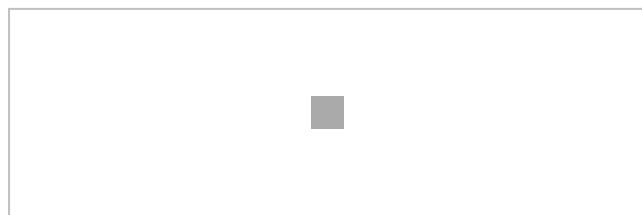
First Assistant Secretary | Global Health Division
Head | Indo-Pacific Centre for Health Security
Department of Foreign Affairs and Trade

s 22(1)(a)(ii)

Executive Officer: s 22(1)(a)(ii)

Executive Assistant: s 22(1)(a)(ii)

dfat.gov.au | [@CentreHealthSec](#) | [Contain This Podcast](#) | [Facebook](#)



I acknowledge the Traditional Owners of Country throughout Australia, and their continuing connection to land, waters and community. We pay our respects to all First Nations peoples, their cultures and to their Elders, past and present..

From: s 22(1)(a)(ii)
To: s 22(1)(a)(ii) s 47E(d)
Subject: s 22(1)(a)(ii) [SEC=OFFICIAL]
Date: Thursday, 14 September 2023 9:37:40 PM

From: s 47E@dfat.gov.au
Sent: Thursday, 14 September 2023 9:36:44 PM (UTC+10:00) Canberra, Melbourne, Sydney
To: undisclosedrecipients@dfat.gov.au
Subject: s 22(1)(a)(ii) [SEC=OFFICIAL]

OFFICIAL

s 22(1)(a)(ii)
s 22(1)
s 22(1)(a)(ii)

Title: s 22(1)(a)(ii)
To: Canberra
Cc: Africa Posts, Geneva UN, UN New York
From: Nairobi (NAIR) Sent by: s 22(1)(a)

Topics: DEVELOPMENT COOPERATION/Aid General, INNOVATION & SCIENCE/Science & Research, POLITICAL-ECONOMIC/Health Security, POLITICAL-ECONOMIC/International Organisations, POLITICAL-ECONOMIC/International Political, UN & COMMONWEALTH/UN Discussions, UN & COMMONWEALTH/UN Institutional

Approved By: HOM
References: s 22(1)
Response: Routine, Information Only

s 22(1)(a)(ii)



s 33(a)(iii)



Sender: s 22(1)