



Background Memo

## *Multilateral Diplomacy on COVID-19 and Preparing for Future Pandemics*

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High-level, multilateral meetings over the last half of 2021 addressed the COVID-19 crisis and the need to improve readiness for future pandemics with mixed results, raising questions about priorities for 2022.

Next month marks the start of the third year of the COVID-19 pandemic. The first year witnessed the [failure](#) of international cooperation within and beyond the World Health Organization (WHO). Multilateralism resurfaced in 2021 as high-level meetings addressed COVID-19 and the need for better pandemic governance. In addition to multilateral efforts, unilateral, bilateral, regional, and multistakeholder initiatives on COVID-19 and pandemic governance also emerged.

Reducing global vaccine inequity dominated diplomacy on COVID-19 in 2021, but the vaccination gap between high-income and low-income countries remained [significant](#) the entire year. On pandemic governance, states did not reach a consensus on reform proposals. Six months after the Independent Panel on Pandemic Preparedness and Response (IPPPR) issued its [report](#) in May, its co-chairs [claimed](#) that governance reforms have not been “fast or cohesive enough” to end the COVID-19 pandemic or prepare the world for the next one.

The identification of the [omicron variant](#) in late November raised alarms around the world. Its emergence reinforced concerns that global vaccine inequity provides fertile conditions for new variants to evolve and sparked controversies over [travel restrictions](#) that highlighted the challenges facing pandemic governance reform.

### **High-Level Meeting Highlights: May to December 2021**

The following brief descriptions of high-level, multilateral meetings convened in 2021 highlight some important outcomes of those diplomatic efforts to address COVID-19 and pandemic governance.

*World Health Assembly (WHA) (May 24–31)*. Before the meeting, WHO Director-General Tedros Adhanom

Ghebreyesus described inequitable vaccine access as “[vaccine apartheid](#),” but WHO members did not adopt a resolution or decision at the WHA on increasing access. WHO members with vaccine supplies did not commit to any game-changing donations during the meeting. On pandemic governance, the WHA did not change how members [finance](#) the organization. It established a [working group](#) to address strengthening the WHO’s capabilities for health emergencies and agreed to convene a WHA [special session](#) to discuss whether to develop a treaty or other instrument to improve pandemic governance (see below).

*Group of Seven (G7) Summit (June 11–13)*. G7 members and partner countries pledged to donate [one billion vaccine doses](#) and to improve collective abilities to prevent, respond to, and recover from future pandemics. Among other things, the summit [communique](#) supported a One Health approach to pandemics, which recognizes the connection between the health of people, animals, and the environment; an improvement in surveillance; an independent outbreak-investigation process; and efforts to make vaccines, therapeutics, and diagnostics available within one hundred days in future pandemics.

*International Forum on COVID-19 Vaccine Cooperation (August 5)*. Launched by China and twenty-two other countries, the [forum](#) recognized vaccines as global public goods and called for increased access in low-income countries through supporting the COVID-19 Vaccines Global Access (COVAX) initiative, increasing funding from international financial institutions, and considering a waiver of intellectual property rights on vaccines at the World Trade Organization (WTO). At the forum, China pledged to make two billion vaccine doses available globally, donate 100 million doses to low-income countries, and provide \$100 million to COVAX by the end of 2021.

*Seventy-Sixth Session of the UN General Assembly (September 14–present)*. Speeches by world leaders at the General Assembly [addressed](#) COVID-19 and pandemic governance. Some leaders, such as U.S. President Joe Biden, [supported](#) the IPPPR’s call for the General Assembly to establish a Global Health Threats Council. As of December 6, the General Assembly had not passed resolutions on COVID-19, pandemic governance, or the call for a council.

*Global COVID-19 Summit (September 22)*. Organized by the United States during the General Assembly, approximately one hundred countries [participated](#) in the summit. The participants [supported](#) increasing equitable vaccine access; addressing the oxygen crisis; expanding the availability of tests, therapeutics, and personal protection equipment; establishing a health security financing mechanism; and tracking progress on these targets. At the summit, the United States announced new commitments, including donating another 500 million vaccine doses.

*Group of Twenty (G20) Summit (October 30–31)*. The summit [declaration](#) supported equitable vaccine access, but the G20 did not take up China’s [proposal](#) for a Global Vaccine Cooperation Action Initiative or make a vaccine-access commitment for its members to meet. Some G20 members, such as Canada and India, unilaterally made new donation pledges. On pandemic governance, the G20 High Level Independent Panel on Financing the Global Commons for Pandemic Preparedness and Response [proposed](#) that the G20 establish a Global Health Threats Board and a Global Health Threats Fund. The G20 created a Joint Finance-Health Task Force to report on modalities for a pandemic financial mechanism but did not address the Global Health Threats Board proposal.

*Twenty-Sixth Conference of the Parties to the UN Framework Convention on Climate Change (October 31–November 13)*. COVID-19 prompted increased interest in reducing deforestation to prevent animal pathogen spillover into humans. The [Glasgow Climate Pact](#) created potential synergy between pandemic prevention and climate change mitigation by emphasizing the need to protect and restore forests. While the pact contained no specific forest commitments, 141 countries containing 90 percent of the planet’s forests separately [pledged](#) to stop and reverse deforestation by 2030.

*WHA Special Session (November 29–December 1)*. The WHA [agreed](#) to establish an intergovernmental negotiating body (INB) to negotiate a treaty or other instrument on pandemic prevention, preparedness, and response. Under this decision, the INB will determine the content of the agreement and decide whether it will be a binding treaty or a nonbinding instrument. The INB’s first meeting will take place no later than March 1, 2022, with a working draft of the instrument presented at its second meeting, to be held by August 1, 2022.

*WTO Ministerial Conference (November 30–December 3)*. In 2021, WTO members discussed a proposal made the previous year to waive intellectual property rights to facilitate greater production of, and equitable access to, vaccines. These discussions were scheduled to continue at the WTO’s twelfth ministerial conference. However, concerns about the omicron variant led the WTO to [postpone](#) the conference indefinitely.

## **Patterns in Multilateral Diplomacy on COVID-19 and Pandemic Governance**

Looking across these snapshots of high-level meetings in 2021, some patterns appear:

- States used multilateralism to address COVID-19, including vaccine inequity, and explore pandemic governance reforms. However, differing state interests limited multilateral diplomatic accomplishments on COVID-19 and pandemic governance.
- The most significant vaccine donation commitments were made during club (e.g., G7) or ad hoc (e.g., the International Forum on COVID-19 Vaccine Cooperation) events rather than WHO or UN meetings. This pattern suggests that donating countries connected their efforts to address vaccine inequity with other foreign policy interests best served by club or ad hoc venues.
- Even with many vaccine donation pledges, vaccine inequity remained a crisis. This pattern reveals persistent tensions between the equity imperative emphasized in multilateral forums, the national interests of countries with vaccine supplies and production capacities, and the practical challenges of getting “shots in arms” at scale in low-income countries.
- Countries continued to discuss changes in pandemic governance without agreeing on specific reforms. In particular, the WHA decision to negotiate a pandemic instrument did not determine what issues the instrument would address and whether it would be binding or nonbinding. This pattern highlights the difficulty of governance reform, the complexity of competing proposals, and the lack of agreement among countries about what reforms to support and how to turn proposals into governance mechanisms.
- Geopolitical competition was apparent, for example, in the U.S. effort to leverage the G7 and Global COVID-19 Summit and China’s creation of the International Forum on COVID-19 Vaccine Cooperation. This pattern reflected the same competition seen in regional vaccine diplomacy between the U.S.-led [Quad Vaccine Partnership](#) and China’s [Initiative for Belt and Road Partnership on COVID-19 Vaccines Cooperation](#).

## **COVID-19, Pandemic Governance, and 2022**

Next year, accelerating actions against COVID-19 and strengthening pandemic governance remain pressing challenges for collective action. Although multilateral diplomacy reemerged during 2021, it did not generate decisive momentum among states on equitably taming COVID-19 or radically reengineering pandemic governance. What effect the omicron variant will have on these tasks remains unclear. However, another year of failed or muddled-through multilateralism could well set back global health for decades.