



UNEP/CMS/Resolution 12.6 (Rev.COP14)

Original: English

WILDLIFE HEALTH AND MIGRATORY SPECIES

Adopted by the Conference of the Parties at its 14th Meeting (Samarkand, February 2024)

Recalling the work on wildlife disease that has been ongoing under the Convention since COP8,

Further recalling Resolutions 8.27, 9.8 and 10.22 on various aspects of wildlife disease, which have been repealed by COP12 and consolidated in Resolution 12.6 Wildlife Disease and Migratory Species,

Acknowledging that wildlife health, livestock and companion animal health, human health, and ecosystem health are interdependent and influenced by multiple factors including socioeconomic factors, the sustainability of agriculture, demographics, climate and landscape changes, and the fact that the environment is the setting (place and context) and determinant of potential resilience to disease,

Aware that wildlife diseases are a normal cause of mortality and morbidity, yet conscious that emerging or re-emerging diseases in wildlife can have serious implications for the status of species, especially when populations are small and fragmented, and that pressures on health can be synergistic or cumulative in their contribution to ill-health and poor reproductive success,

Acknowledging that wildlife disease conditions can be non-infectious as a result of, inter alia, pervasive toxic pollutants such as plastics, poisons, chemical and organic pollution, human-induced injury, undernourishment and stress from environmental disruption; and *further recognizing* the relationship between these and loss of resilience to other diseases within wildlife populations,

Further acknowledging that healthy, well-managed, resilient ecosystems positively influence health across sectors, and that preventative approaches to managing health are much more cost-effective than addressing health problems once they emerge,

Recalling UN General Assembly Resolution A/76/L.75 recognizing the right to a clean, healthy and sustainable environment as a human right,

Concerned that, as supported by the analysis of diseases of concern in the CMS Review on Migratory Species and Health (UNEP/CMS/COP14/Inf.30.4.3), the increased frequency of wildlife diseases is driven by ecosystem disruption and ecosystem services loss, including landscape fragmentation, unsustainable land-use choices, unsustainable agriculture and aquaculture practices, overexploitation, spread of invasive species, pollution and climate change,

Recognizing the range of impacts that climate change has on wildlife health, inter alia, through changes in habitat and altered physiological conditions for hosts and parasites, which can result in the spread of pathogens and invertebrate vectors in particular, with consequences for the emergence of disease in new geographic locations,

Aware also that our understanding of the causes and epidemiology of wildlife diseases is often poor, a situation exacerbated by limited surveillance and research, undermining ability to reduce or mitigate disease risks across all sectors of wildlife, people and domestic animals,

Noting also that domestic, feral and wild animals and humans share many pathogens, with wildlife sometimes being natural reservoirs of pathogens with the potential to affect both domestic animal and public health, increase pandemic risk, as well as to affect food production, livelihoods and wider economies,

Further noting that transmission of disease from wildlife is sometimes related to changes in human activities and, while novel or unusual zoonotic pathogens of wildlife pose a pandemic or other risks to people, the source of the majority of zoonotic infections is from livestock and/or companion animals, nevertheless, pathogen spillover and any zoonotic infections from novel pathogens directly from wildlife pose a significant risk to wildlife, livestock and people,

Cognisant that conditions of crowding, stress and injury among wild animals in trade can lead to pathogen spread, and close proximity to people during capture, farming, transportation and butchering creates opportunities for transmission between animals and potentially to people,

Further acknowledging the importance of the work on animal culture and social complexity under CMS, and the relevance of this work to the health and well-being of migratory species,

Aware that the dynamics of diseases relating to migration are complex and migration can have both positive and potentially negative effects on the health of the hosts and subsequent risks to domestic animals and people,

Recognizing that in addition to migratory species being disease victims, they can also suffer indirect effects if they are recognized as disease vectors and can be subject to inappropriate disease control measures and consequences arising from negative public perceptions,

Acknowledging the impacts that some wildlife trade, can have on biodiversity, especially on threatened or endangered species, and on food security, and further acknowledging the risk posed by wildlife trade, pet trade and other regional or international movements of animals and animal products in spreading pathogens and causing emergence of infectious diseases in wildlife, domestic animals and/or humans, while, at the same time, welcoming the collaborative efforts of CITES and the World Organization for Animal Health (WOAH) to address risks from zoonotic pathogens,

Acknowledging that some high-risk live animal markets can act as drivers of pathogen change, increasing likelihood of pathogen transmission between host and between species, including to migratory wildlife and humans,

Further recognizing that some intensive animal farming can provide opportunities for pathogens (from whatever source) to be amplified to epidemic proportions and/or transformed (e.g. by mutation, reassortment or recombination) into more virulent and/or transmissible variants, and that these pathogens may subsequently spill over¹ into wildlife (and/or humans) causing high mortality, sometimes with subsequent 'spillback' of these pathogens into

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¹ Spillover: infectious agent, usually at relatively high prevalence, 'spills' (is transmitted) into a new host, usually crossing a species barrier.

livestock, and, as such, recognizing that the phasing out and prevention of such forms of animal farming is highly desirable to achieve One Health objectives,

Acknowledging that the One Health approach is now recognised as an integrated, unifying approach that aims to sustainably balance and optimize the health of people, wild and domestic animals, and ecosystems, including how to address emerging infectious diseases, and that the concept has been endorsed by multiple international organizations including FAO, WOAH, WHO, UNEP, IUCN, UNICEF and the World Bank; and *further welcoming* the consensus on appropriate approaches and responses to wildlife diseases that have developed among UN agencies, multilateral environmental agreements and other international organizations, reflected, for example, in decisions and resolutions of the Ramsar Convention, AEWA and CMS,

Recognizing the key role of the environment in determining health and its importance to pandemic prevention,

Welcoming the joining of UNEP to the existing 'health Tripartite' of WHO, WOAH and FAO to form the Quadripartite and the development of the One Health Joint Plan of Action (2022-2026), as well as the creation of the One Health High-Level Expert Panel (OHLEP); and further welcoming the 2022 Kunming-Montreal Global Biodiversity Framework from which One Health initiatives can emerge,

Further welcoming the significant work in the area of wildlife health by FAO, the Working Group on Wildlife Diseases of the WOAH, the IUCN Wildlife Health Specialist Group and Conservation Planning Specialist Group, UNEA, including its Resolution 5/6 *Biodiversity and Health*, and the work by multiple non-governmental agencies and organizations,

Welcoming the outcomes of Ramsar Convention work on the theme of 'Healthy Wetlands, Healthy People', including Resolution XI.12 Wetlands and health: taking an ecosystem approach, which stresses the functional role that wetlands play in providing ecosystem services that support the health of both human and wildlife populations; and further welcoming the guidance provided by the Ramsar Wetland Disease Manual, which provides practical disease guidance for habitat managers and policymakers,

Noting the work of the intergovernmental negotiating body, 'The World Together', to draft and negotiate a WHO convention, agreement or other international instrument on pandemic prevention, preparedness and response,

Noting, however, that despite the broad international and intersectoral recognition of the need to deal jointly with the health of humans, animals and ecosystems, the national planning for and responses to wildlife health have, in many situations, yet to be acknowledged as essential elements of disease prevention, preparedness, surveillance or monitoring programmes, epidemiological investigations, and/or outbreak responses by all sectors,

Noting the benefits of cross-sectoral organizational structures and communication involving health management authorities, health professionals, biologists, veterinarians and natural resource professionals, and Indigenous Peoples and Local Communities for planning and responding to the complex issues surrounding human, animal and ecosystem health,

Warmly welcoming the development of national wildlife health strategies by some Parties and other governments; while noting that many developing countries lack functional wildlife health-related programmes and strategies, policies and the infrastructure needed to protect human health, and agricultural and wildlife interests from endemic or introduced diseases,

Acknowledging the importance of existing global disease information and intelligence systems, including those coordinated by the Quadripartite related to early warning, emerging infectious diseases and wildlife health, and the need for both urgency in reporting and inclusion of contextual epidemiological and environmental information, and to assure good communication and avoid unnecessary overlap in global reporting requirements,

Welcoming the focus on wildlife disease by the CMS and establishment of the CMS Migratory Species and Health Working Group² of the Scientific Council as a mechanism for further elaborating and coordinating the work of CMS on issues related to health of migratory species and how this is related to health in other sectors of domestic animal and human health including pandemic risk, and advising Parties accordingly,

Further acknowledging the valuable work of the CMS as it relates to wildlife health, inter alia, the Preventing Poisoning Working Group; the Intergovernmental Task Force on Phasing Out the Use of Lead Ammunition and Lead Fishing Weights; the Scientific Task Force on Avian Influenza and Wild Birds; the Intergovernmental Task Force on Illegal Killing, Taking and Trade of Migratory Birds in the Mediterranean; and the Asia-Pacific Illegal Taking of Migratory Birds Intergovernmental Task Force, and

Further welcoming the Review of Migratory Species and Health (UNEP/CMS/COP14/Inf.30.4.3) funded by the Governments of Germany and the United Kingdom, undertaken by the University of Edinburgh, UK, to inform the work of the CMS Migratory Species and Health Working Group,

The Conference of the Parties to the Convention on the Conservation of Migratory Species of Wild Animals

Tackling drivers of health problems

- Urges Parties to recognize the links between the drivers of population decline and disease emergence, and urgently enhance actions to address the drivers of migratory species population decline by, inter alia, reducing habitat loss, fragmentation and degradation; addressing climate change mitigation and adaptation; preventing pollution; preventing the spread of invasive non-native species; addressing high-risk agricultural and aquacultural practices, preventing over-exploitation, reducing the wildlife/livestock and wildlife/human interfaces;
- 2. *Urges* Parties and others to minimize the risk of infectious disease to wildlife and pathogen spillover by:
 - taking robust measures at livestock-wildlife interfaces, inter alia, those linked to agriculture and aquaculture and encroachment into wild areas, pastoralism, improving biosecurity, livestock vaccination if necessary and better planning and reassessment of intensive production where risks have been identified,
 - b) endeavouring to prevent pathogen contamination / spillover to and from wildlife from feral or otherwise released animals, from legally and illegally traded plants and animals (including commercial urban markets), and from invasive non-native species, recognizing, at all times, the value of preventative approaches, and
 - focusing efforts on reducing or otherwise managing those practices that are high risk for pathogen transfer and drivers of pathogen change;

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² Terms of Reference in document UNEP/CMS/ScC-SC5/Outcome 11

- 3. *Encourages* Parties and others to minimize non-infectious negative impacts on wildlife health by, inter alia:
 - a) taking action to reduce and mitigate pollutants and poisons, particularly where regulatory restriction and/or enforcement is required,
 - b) mitigating human-induced injury of wildlife (in infrastructure and other human developments and activities), and
 - c) considering the effects of nutritional deficits and stressors in terms of resilience to other diseases when planning changes to land use or altering habitats;

Enabling frameworks for health

- 4. Requests Parties to take One Health and ecosystem approaches that recognize the interconnection between people, animals, plants and their shared environment, ensuring equitable decision-making and a multi-sectoral unified approach to health management;
- 5. Encourages Parties to promote and enhance multisectoral and transdisciplinary collaboration at the national level, and cooperation at the international level, in order to prevent and respond to wildlife health threats;

Solutions for tackling health problems

- 6. *Requests* Parties and others managing migratory wildlife to develop strategies for prevention, preparedness and response to wildlife health threats by:
 - a) developing wildlife health strategies with contingency and emergency response plans, with input from all relevant stakeholders, thus ensuring prevention of problems and appropriate responses in emergency situations;
 - b) strengthening and supporting wildlife health systems to support wildlife health strategies by bringing together expertise, resources and organizational structures that enable, inter alia, effective early warning systems and risk assessment;
 - c) strengthening and supporting wildlife health and disease surveillance, with biodiversity conservation as a goal, and integrating ecological and population monitoring into surveillance systems;
 - d) encouraging and supporting outbreak investigations, improvements in wildlife diagnostics, testing facilities and reporting systems, and data- and information-sharing, while additionally preventing delays in diagnosis and research caused by regulatory limits on transporting specimens across national boundaries;

Information sources for tackling health problems

- 7. *Encourages* Parties to inform their planning for wildlife health by:
 - a) taking note of the CMS Migratory Species and Health Review (UNEP/CMS/COP14/Inf.30.4.3) and implementing its key recommendations where relevant; and
 - making proactive use of the substantial existing guidance provided by intergovernmental and other organizations on how to manage and respond to wildlife diseases and to share best practice guidelines and experience;

Knowledge gaps and prioritization

8. *Encourages* Parties to address the significant knowledge gaps concerning the epidemiology and drivers of many diseases of migratory species that prevent good health management, and *further encourages* Parties to support research and resourcing

targeted at priority health threats to migratory species, particularly those of unfavourable conservation status;

Cooperation

- 9. *Invites* Parties to contribute voluntarily to rapid reporting systems for wildlife morbidity and mortality events in collaboration with WOAH national delegates and wildlife focal points, taking fully into account the WOAH World Animal Health Information System (WAHIS), the joint FAO–WOAH–WHO Global Early Warning System for health threats and emerging risks at the human–animal–ecosystems interface (GLEWS+), and existing regional information systems, and the need to complement existing communication channels, specifically WOAH disease reporting and ProMed-mail;
- 10. Calls on Parties to collaborate with and share information simultaneously with WOAH national delegates and wildlife focal points, WOAH WAHIS, the IUCN Wildlife Health Specialist Group, the joint FAO–WOAH–WHO GLEWS and existing regional information systems;
- 11. Encourages Parties and non-governmental organizations to work with the Quadripartite to: assess response and capacity development needs; evaluate resources needed to deliver these; and work collectively with the donor community to provide the necessary resources;
- 12. Urges the Secretariat and further urges CMS focal points and ministries responsible for wildlife to engage with their representatives to WHO, to ensure that mechanisms to prevent pathogen emergence at source and One Health approaches, wildlife issues and pandemic prevention at source are reflected in the WHO convention, agreement or other international instrument on pandemic prevention, preparedness and response under negotiation;
- 13. Encourages the WHO to further work with the wildlife and environment sector on pandemic preparedness, and urges ongoing collaboration and coordination between intergovernmental bodies to further incorporate conservation and environmental considerations into existing mechanisms established through the Quadripartite organizations;

Funding needs

- 14. Requests Parties and international donor organizations to support the implementation of this Resolution and the work of the CMS Migratory Species and Health Working Group in the development and implementation of its Programme of Work to support CMS in addressing health concerns of migratory species and to contribute to One Health initiatives and pandemic prevention;
- 15. Calls on Parties and international donor organizations to provide technical and financial support to assist low- and middle-income countries in establishing appropriate pathogen and disease surveillance in wildlife populations, and management and control of wildlife diseases, including outbreak management; and

CMS engagement

16. Requests the Secretariat to provide support for the Migratory Species and Health Working Group in the development and implementation of its Programme of Work, and to promote cooperation with the Quadripartite, One Health High-Level Expert Panel and CITES.