



**CONVENTION ON
MIGRATORY
SPECIES**

UNEP/CMS/COP15/Doc.28.5

7 October 2025

Original: English

15th MEETING OF THE CONFERENCE OF THE PARTIES
Campo Grande, Brazil, 23 to 29 March 2026
Agenda Item 28.5

WILDLIFE HEALTH

(Prepared by the Scientific Council)

Summary:

This document reports on implementation of Decisions 14.218–14.220 *Wildlife Health*. It proposes amendments to Resolution 12.6 (Rev.COP14) *Wildlife health and migratory species*, the deletion of Decisions 14.218–14.220 and the adoption of new Decisions.

The amendments to the Resolution and the new draft Decisions would support the achievement of Target 3.1 of the Samarkand Strategic Plan for Migratory Species 2024–2032.

WILDLIFE HEALTH

Background

1. CMS has been working on wildlife disease since COP8 (2005). The COVID-19 pandemic and the panzootic spread of highly pathogenic avian influenza have drawn attention to the importance of wildlife health and how this relates to conservation impacts, zoonotic risks and risks to livestock, with subsequent impacts on food security and trade. This new focus is complemented by the mainstreaming of One Health approaches, for example in the work of the Health Quadripartite – WHO, FAO, World Organisation for Animal Health (WOAH) and UNEP – and initiatives such as the Pandemic Agreement. CMS is well placed to contribute significantly to these areas of work, to the benefit of migratory species.
2. COP14 adopted [Resolution 12.6 \(Rev.COP14\) Wildlife Health and Migratory Species](#), which set out the relationships between environmental degradation and ill health, and how both conservation and the health of wildlife, the environment, livestock and people could benefit from tackling drivers of population decline and adopting a One Health approach. The 2024 *Review of Migration and Wildlife Disease Dynamics, and the Health of Migratory Species, within the Context of One Health* ([UNEP/CMS/COP14/Inf.30.4.3](#)) provided an analysis of the importance of the health of migratory species, and made key recommendations for improving the health of wildlife for the benefit of all sectors. The analysis provides a solid foundation for further CMS work, including that of the Working Group on Migratory Species and Health.
3. CMS COP 14 also adopted [Resolution 14.18 Avian Influenza](#), which outlined the unprecedented near-global spread of the disease in wildlife, the serious impacts it is having on multiple avian and mammalian species, and the key actions that are needed to both help reduce risks and aid the recovery of affected populations.
4. COP14 further adopted Decisions 14.219–14.220 *Wildlife Health*, which read as follows:

14.219 Directed to the Scientific Council

The Scientific Council is requested to provide any recommendations on issues related to migratory species and health, as appropriate, to COP15, noting the establishment of the CMS Scientific Council Working Group on Migratory Species and Health (Terms of Reference are contained in the document UNEP/CMS/ScC-SC5/Outcome 11) and the Scientific Task Force on Avian Influenza and Wild Birds.

14.220 Directed to the Secretariat

The Secretariat is requested, subject to the availability of resources, to:

- a) *engage with WHO regarding the development of an instrument on pandemic prevention, preparedness and response;*
- b) *organize an online meeting of the CMS Scientific Council Working Group on Migratory Species and Health and the Scientific Task Force on Avian Influenza and Wild Birds to set up their work programmes; and*
- c) *provide support for implementation of the work programmes of the CMS Scientific Council Working Group on Migratory Species and Health and the Scientific Task Force on Avian Influenza and Wild Birds, including commissioning studies or organizing workshops, as appropriate.*

Activities

5. To implement Decision 14.219, ScC-SC7 re-established the Working Group on Migratory Species and Health, with an amended Terms of Reference contained in document [UNEP/CMS/ScC-SC7/Outcome2](#).
6. The Scientific Council also considered the Terms of Reference for the CMS–FAO co-convened Scientific Task Force on Avian Influenza and Wildlife, which now need to be finalized and adopted in agreement with FAO.

Working Group on Migratory Species and Health

7. The Working Group was convened four times between April and September 2025 to provide focus and strategic guidance for CMS’s work on migratory species and health.
8. The UK Government generously funded a researcher to compile One Health case studies of relevance to CMS. The Working Group provided technical edits to the resulting report, *One Health Case Studies: a resource for Parties to the Convention on Migratory Species*, which is now available as document [UNEP/CMS/COP15/Inf.28.5a](#).
9. Additionally, a member of the Working Group, together with the COP-appointed Councillor for Invasive species, disease, feral animals, insects, and marine pests and weeds (hereinafter called the Councillor for Wildlife Health), supported a doctoral student to carry out a review of Resolutions adopted up until COP14 to map out how these mandates relate to health. The Working Group provided comments on the subsequent report, *Examining Resolutions and Articles from the Convention on the Conservation of Migratory Species (CMS) to find strategic opportunities for the Working Group on Migratory Species and Health*, which is available as document [UNEP/CMS/COP15/Inf.28.5b](#).
10. Drawing on the lessons learned and key points from both reports, the Working Group formulated *Key Messages from the ‘CMS Resolutions and Health Analysis’ and the ‘One Health Case Studies’*, which are contained in Annex 3 to this document.
11. The Working Group also proposed revisions to Resolution 12.6 (Rev.COP14), as presented in Annex 1 to this document. These aim to: shorten and simplify the text, mainly in the preamble, to improve clarity and reflect developments in the Pandemic Agreement; make small changes to the operative text; and draw attention to the findings from the two Working Group reports mentioned in paragraphs 9 and 10 above.
12. The Working Group also developed its Programme of Work for the next intersessional period.

CMS–FAO co-convened Scientific Task Force on Avian Influenza and Wildlife

13. The Task Force has not met during this intersessional period and its [Statement from 2023](#) remains in place. A new statement is being prepared, together with the Wildlife Group of the joint WOA–FAO global network of expertise on animal influenzas (OFFLU)¹ to provide a global situation update.

¹ The global network of expertise on animal influenza was established jointly by FAO and WOA (earlier OIE) to support and coordinate global efforts to prevent, detect and control important influenzas in animals.

14. With a well-established appreciation of the value of One Health approaches in addressing highly pathogenic avian influenza – and in alignment with the goals of the Health Quadripartite (WHO, FAO, WOA and UNEP) – the main activities of the Task Force have focused on ensuring that wildlife and conservation considerations are integrated into intergovernmental avian influenza strategy development, such as the joint FAO–WOAH [Global Strategy for the Prevention and Control of High Pathogenicity Avian Influenza \(2024-2033\)](#) and the Quadripartite strategic framework for addressing threats from zoonotic influenza at the animal-human-environment interface. Additionally, the Task Force focused on communication and outreach with key stakeholders and wider audiences. These activities are summarized in Annex 4.

Recommended actions

15. The Conference of the Parties is recommended to:
- a) adopt the draft amendments to Resolution 12.6 (Rev.COP14) contained in Annex 1 of this document;
 - b) adopt the draft Decisions contained in Annex 2 of this document;
 - c) note the ‘Key Messages’ contained in Annex 3 of this document;
 - d) note the activities of the CMS–FAO Scientific Task Force on Avian Influenza and Wildlife since COP14, contained in Annex 4 of this document; and
 - e) delete Decisions 14.218–14.220.

ANNEX 1

PROPOSED AMENDMENTS TO RESOLUTION 12.6 (REV.COP14)

WILDLIFE HEALTH AND MIGRATORY SPECIES

NB: Proposed new text is underlined. Text to be deleted is ~~crossed-out~~.

Text from Existing Resolution	Commentary	Clean New Text Proposed (including new numbering of the operative paragraphs)
WILDLIFE HEALTH AND MIGRATORY SPECIES	Retain	WILDLIFE HEALTH AND MIGRATORY SPECIES
<i>[PP1] Recalling the work on wildlife disease that has been ongoing under the Convention since COP8,</i>	Retain	<i>Recalling the work on wildlife disease that has been ongoing under the Convention since COP8,</i>
<i>[PP2] 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 <u>Wildlife Disease and Migratory Species</u> and developed significantly following increased CMS attention on health in Resolution 12.6 (Rev.COP14) <u>Wildlife Health and Migratory Species</u>,</i>	Updated language	<i>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 <u>Wildlife Disease and Migratory Species</u> and developed significantly following increased CMS attention on health in Resolution 12.6 (Rev.COP14) <u>Wildlife Health and Migratory Species</u>,</i>
<i>[PP3] Acknowledging that wildlife and ecosystem health, livestock and companion animal health, human health, and ecosystem health are interdependent and influenced by multiple socioeconomic 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,</i>	Merged with PP8 into new preambular paragraph PP3bis	
<i>[PP3bis] <u>Acknowledging that wildlife and ecosystem health, livestock and companion animal health, and human health are interdependent and influenced by multiple socioeconomic factors, and concerned about the impacts of emerging and re-emerging wildlife diseases that are being driven by ecosystem</u></i>	New paragraph merged from PP 3 and PP8	<i>Acknowledging that wildlife and ecosystem health, livestock and companion animal health, and human health are interdependent and influenced by multiple socioeconomic factors, and <i>concerned</i> about the impacts of emerging and re-emerging wildlife diseases that are being driven by</i>

Text from Existing Resolution	Commentary	Clean New Text Proposed (including new numbering of the operative paragraphs)
<u>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,</u>		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,
[PP4] 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,	Merged with PP5 into new preambular paragraph PP5bis	
[PP5] 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,	Merged with PP4 into new preambular paragraph PP5bis	
<u>[PP5bis] Conscious that infectious or non-infectious threats to wildlife health 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,</u>	New paragraph merged from PP4 and PP5	<i>Conscious</i> that infectious or non-infectious threats to wildlife health 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,
<u>[PP6] Further acknowledging that the environment is the setting (place and context) and a determinant for healthy, and that conservation measures to create and maintain well-managed, resilient ecosystems positively influence health across sectors, and that preventative approaches to managing health are much</u>	Updated language	<i>Further acknowledging</i> that the environment is the setting (place and context) and a determinant for health and that conservation measures to create and maintain well-managed, resilient ecosystems positively influence health across sectors, and that preventative approaches to

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more cost-effective than addressing health problems once they emerge,		managing health are much more cost-effective than addressing health problems once they emerge,
[PP7] Recalling UN General Assembly Resolution A/76/L.75 recognizing the right to a clean, healthy and sustainable environment as a human right,	Repeal	
[PP8] 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,	Merged with PP3 into new preambular paragraph PP3bis	
[PP9] 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 Res. 12.6, preambular 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,	Repeal	
[PP10] 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,	Repeal	
[PP11] 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,	Repeal	

Text from Existing Resolution	Commentary	Clean New Text Proposed (including new numbering of the operative paragraphs)
[PP12] 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,	Repeal	
[PP13] 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,	Merged with PP17 and PP18 into new preambular paragraph PP18bis	
[PP14] 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,	Repeal	
[PP15] 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,	Repeal	
[PP16] 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,	Retain	<i>Recognizing</i> 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,
[PP17] 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	Merged with PP13 and PP18 into new preambular paragraph PP18bis	

Text from Existing Resolution	Commentary	Clean New Text Proposed (including new numbering of the operative paragraphs)
<p>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,</p>		
<p>[PP18] 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,</p>	<p>Merged with PP13 and PP17 into new preambular paragraph PP18bis</p>	
<p><u>[PP18bis] Acknowledging the particular risks of spreading pathogens and causing emergence of infectious diseases in wildlife, domestic animals and/or humans posed by wildlife trade where crowded conditions, stress and injury, and close proximity to people during capture, farming, transportation, marketing and butchering create opportunities for transmission between animals, and potentially to people, further acknowledging risks related to the pet trade and other regional or international movements of animals and animal products, while, at the same time, welcoming the collaborative efforts of CITES, FAO and the World Organisation for Animal Health (WOAH) to address such risks,</u></p>	<p>New paragraph merged from PP13, PP17 and PP18</p>	<p><i>Acknowledging the particular risks of spreading pathogens and causing emergence of infectious diseases in wildlife, domestic animals and/or humans posed by wildlife trade where crowded conditions, stress and injury, and close proximity to people during capture, farming, transportation, marketing and butchering create opportunities for transmission between animals, and potentially to people, further acknowledging risks related to the pet trade and other regional or international movements of animals and animal products, while, at the same time, welcoming the collaborative efforts of CITES, FAO and the World Organisation for Animal Health (WOAH) to address such risks,</i></p>
<p>[PP19] Further r<i>Recognizing</i> 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 and morbidity, sometimes with subsequent 'spillback' of these pathogens into livestock, and,</p>	<p>Updated language</p>	<p><i>Recognizing</i> 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 mortality and morbidity, sometimes with subsequent 'spillback' of these pathogens into livestock,</p>

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

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as such, recognizing that the phasing out and prevention of such forms of animal farming is highly desirable to achieve One Health objectives,		and, as such, recognizing that the phasing out and prevention of such forms of animal farming is highly desirable to achieve One Health objectives,
<p><i>[PP20] Acknowledging</i> that the One Health approach is now recognized 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 <u>the One Health High-Level Expert Panel (OHHLEP), the Quadripartite partners (FAO, WOA, WHO, and UNEP), IUCN, UNICEF and the World Bank, and is used within the WHO Pandemic Agreement; and further welcoming</u> the consensus on appropriate approaches and responses to wildlife diseaseshealth that have developed among UN agencies, multilateral environmental agreements and other international organizations, reflected, for example, in decisions and resolutions of the Ramsar Convention on Wetlands, AEWA and CMS,</p>	Updated language	<p><i>Acknowledging</i> that the One Health approach is now recognized 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 the One Health High-Level Expert Panel (OHHLEP), the Quadripartite partners (FAO, WOA, WHO and UNEP), IUCN, UNICEF and the World Bank, and is used within the WHO Pandemic Agreement; and <i>further welcoming</i> the consensus on appropriate approaches and responses to wildlife health that have developed among UN agencies, multilateral environmental agreements and other international organizations, reflected, for example, in decisions and resolutions of the Ramsar Convention on Wetlands, AEWA and CMS,</p>
<p><i>[PP20bis] Welcoming</i> the Pandemic Agreement which <u>recognizes the importance of the environment and stresses that adequate pandemic prevention, preparedness, response and health systems recovery is part of a continuum to combat other health emergencies and achieve greater health equity through resolute action on the social, environmental, cultural, political and economic determinants of health,</u></p>	New paragraph	<p><i>Welcoming</i> the Pandemic Agreement which recognizes the importance of the environment and stresses that adequate pandemic prevention, preparedness, response and health systems recovery is part of a continuum to combat other health emergencies and achieve greater health equity through resolute action on the social, environmental, cultural, political and economic determinants of health,</p>
<p><i>[PP21] Recognizing</i> the key role of the environment in determining health and its importance to pandemic prevention,</p>	Repeal	
<p><i>[PP22] Welcoming</i> the joining of UNEP to the existing 'health Tripartite' of WHO, WOA and FAO to form the Quadripartite and the development of the One Health Joint Plan of Action</p>	Repeal	

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(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,		
<i>[PP23] Further welcoming</i> the significant work in the area of wildlife health by FAO, the Working Group on Wildlife Diseases of the WOA, the IUCN Wildlife Health Specialist Group and Conservation Planning Specialist Group, UNEA, including its Resolution 5/6 <i>Biodiversity and Health</i> , and the work by multiple non-governmental agencies and organizations,	Retain	<i>Further welcoming</i> the significant work in the area of wildlife health by FAO, the Working Group on Wildlife Diseases of the WOA, the IUCN Wildlife Health Specialist Group and Conservation Planning Specialist Group, UNEA, including its Resolution 5/6 <i>Biodiversity and Health</i> , and the work by multiple non-governmental agencies and organizations,
<i>[PP24] Welcoming</i> the outcomes of Ramsar Convention work on the theme of 'Healthy Wetlands, Healthy People', including Resolution XI.12 <i>Wetlands and health: taking an ecosystem approach</i> , which stresses the functional role that wetlands play in providing ecosystem services that support the health of both human and wildlife populations, and <i>further welcoming</i> the guidance provided by the <i>Ramsar Wetland Disease Manual</i> , which provides practical disease guidance for habitat managers and policymakers,	Retain	<i>Welcoming</i> the outcomes of Ramsar Convention work on the theme of 'Healthy Wetlands, Healthy People', including Resolution XI.12 <i>Wetlands and health: taking an ecosystem approach</i> , which stresses the functional role that wetlands play in providing ecosystem services that support the health of both human and wildlife populations, and <i>further welcoming</i> the guidance provided by the <i>Ramsar Wetland Disease Manual</i> , which provides practical disease guidance for habitat managers and policymakers,
<i>[PP25] 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,</i>	Repeal	
<i>[PP26] Noting, however,</i> 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 <u>are often inadequate, being limited by surveillance and knowledge gaps and have</u> , in many situations, yet to be acknowledged as essential elements of disease prevention, preparedness,	Updated language	<i>Noting, however,</i> 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 are often inadequate, being limited by surveillance and knowledge gaps, and have, in many situations, yet to be acknowledged as essential elements of disease prevention, preparedness,

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surveillance or monitoring programmes, epidemiological investigations, and/or outbreak responses by all sectors,		surveillance or monitoring programmes, epidemiological investigations, and/or outbreak responses by all sectors,
<i>[PP27] Noting</i> the benefits of cross-sectoral organizational structures and communication involving health management authorities, health professionals, biologists, veterinarians, <u>conservationists</u> , and natural resource professionals, and Indigenous Peoples and Local Communities for planning and responding to the complex issues surrounding human, animal and ecosystem health,	Updated language	<i>Noting</i> the benefits of cross-sectoral organizational structures and communication involving health management authorities, health professionals, biologists, veterinarians, <u>conservationists</u> , natural resource professionals, and Indigenous Peoples and local communities for planning and responding to the complex issues surrounding human, animal and ecosystem health,
<i>[PP28] Warmly welcoming</i> the development of national wildlife health strategies by some Parties and other governments; <i>while noting</i> 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,	Repeal	
<i>[PP29] Acknowledging</i> 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,	Repeal	
<i>[PP30] Welcoming</i> the focus on wildlife disease by the CMS and establishment of the CMS <u>Working Group on Migratory Species and Health Working Group</u> ² of the Scientific Council as a mechanism for further elaborating and coordinating the <u>this</u> work of CMS on issues related to health of migratory species and <u>additionally</u> how this is related to health in other sectors of	Updated language	<i>Welcoming</i> the focus on wildlife health by the CMS and establishment of the CMS Working Group on Migratory Species and Health of the Scientific Council as a mechanism for further elaborating and coordinating this work on issues related to health of migratory species and additionally how this is related to health in other sectors of

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

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domestic animal and human health including pandemic risk, and advising Parties accordingly,		domestic animal and human health including pandemic risk, and advising Parties accordingly,
[PP31] 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 the Working Group on Climate Change, and	Updated language	<i>Further acknowledging</i> 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; the Asia-Pacific Illegal Taking of Migratory Birds Intergovernmental Task Force; and the Working Group on Climate Change, and
[PP32] 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,	Updated language	<i>Welcoming</i> 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,
<i>The Conference of the Parties to the Convention on the Conservation of Migratory Species of Wild Animals</i>		
<i>Tackling drivers of health problems</i>	Retain	<i>Tackling drivers of health problems</i>
1. Urges Parties to recognize the links between the drivers of population decline and disease emergence, and urgently enhance actions to address these drivers of migratory species population decline by, inter alia, reducing habitat loss, fragmentation and degradation; addressing drivers of climate change mitigation and enhancing mitigation and adaptation ; preventing pollution; preventing the spread of invasive non-native	Updated language	1. <i>Urges Parties to recognize the links between the drivers of population decline and disease emergence, and urgently enhance actions to address these by, inter alia, reducing habitat loss, fragmentation and degradation; addressing drivers of climate change and enhancing mitigation and adaptation; preventing pollution; preventing the spread of invasive non-native species; addressing high-risk agricultural and aquacultural</i>

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<p>species; addressing high-risk agricultural and aquacultural practices; preventing over-overexploitation; and, reducing the health risks at wildlife/livestock and wildlife/human interfaces;</p>		<p>practices; preventing overexploitation; and reducing health risks at wildlife/livestock and wildlife/human interfaces;</p>
<p>2. <i>Urges</i> Parties and others to minimize the risk of infectious disease to wildlife and pathogen spillover by:</p> <ul style="list-style-type: none"> a) taking robust measures at livestock-wildlife interfaces, inter alia, those linked to agriculture and aquaculture and encroachment into wild areas, pastoralism, improving biosecurity, livestock domestic animal vaccination if necessary as appropriate and better planning and reassessment of intensive animal production where health risks have been identified, b) endeavouring implementing measures 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 c) focusing efforts on reducing or otherwise managing those practices that are high risk for pathogen transfer and drivers of pathogen change; 	<p>Updated language</p>	<p>2. <i>Urges</i> Parties and others to minimize the risk of infectious disease to wildlife and pathogen spillover by:</p> <ul style="list-style-type: none"> a) taking robust measures at livestock-wildlife interfaces, inter alia, those linked to agriculture and aquaculture and encroachment into wild areas, pastoralism, improving biosecurity, domestic animal vaccination as appropriate and better planning and reassessment of intensive animal production where health risks have been identified, b) implementing measures 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 c) focusing efforts on reducing or otherwise managing those practices that are high risk for pathogen transfer and drivers of pathogen change;

Text from Existing Resolution	Commentary	Clean New Text Proposed (including new numbering of the operative paragraphs)
<p>3. <i>Encourages</i> Parties and others to <u>take actions</u> to minimize non-infectious negative impacts on wildlife health by, inter alia:</p> <p>a) taking action to <u>reducinge</u> and <u>mitigatinge</u> pollutants and poisons, particularly where regulatory restriction and/or enforcement is required,</p> <p>b) <u>taking strong management actions to prevent pollutants and poisons from entering aquatic systems, and working to restore marine and freshwater habitats of migratory species,</u></p> <p>c) mitigating human-induced injury of wildlife (<u>inter alia</u>, in infrastructure and other human developments and activities), and</p> <p>d) considering the effects of nutritional deficits and stressors in terms of resilience to other diseases when planning changes to land use or altering habitats;</p>	Updated language	<p>3. <i>Encourages</i> Parties and others to take actions to minimize non-infectious negative impacts on wildlife health by, inter alia:</p> <p>a) reducing and mitigating pollutants and poisons, particularly where regulatory restriction and/or enforcement is required,</p> <p>b) taking strong management actions to prevent pollutants and poisons from entering aquatic systems, and working to restore marine and freshwater habitats of migratory species,</p> <p>c) mitigating human-induced injury of wildlife (<i>inter alia</i>, in infrastructure and other human developments and activities), and</p> <p>d) considering the effects of nutritional deficits and stressors in terms of resilience to other diseases when planning changes to land use or altering habitats;</p>
<i>Enabling frameworks for health</i>	Retain	<i>Enabling frameworks for health</i>
<p>4. <i>Requests</i> Parties to take, <u>inter alia</u>, One Health and ecosystem approaches that recognize the interconnection between people, animals, plants and their shared environment, ensuring equitable decision-making and a multisectoral unified approach to health management;</p>	Updated language	<p>4. <i>Requests</i> Parties to take, <i>inter alia</i>, One Health and ecosystem approaches that recognize the interconnection between people, animals, plants and their shared environment, ensuring equitable decision-making and a multisectoral unified approach to health management;</p>
<p>5. <i>Encourages</i> 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;</p>	Retain	<p>5. <i>Encourages</i> 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;</p>
<i>Solutions for tackling <u>wildlife</u> health problems</i>	Updated language	<i>Solutions for tackling <u>wildlife</u> health problems</i>

Text from Existing Resolution	Commentary	Clean New Text Proposed (including new numbering of the operative paragraphs)
<p>6. <i>Requests</i> Parties and others managing migratory wildlife to develop <u>and evaluate</u> strategies for prevention, preparedness and response to wildlife health threats by:</p> <ul style="list-style-type: none"> 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;^{7,1} b) <u>ensuring plans and responses reflect One Health approaches, avoiding disease management actions that have adverse conservation impacts.</u> c) 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;^{7,2} d) strengthening and supporting wildlife health and disease surveillance, with biodiversity conservation as a goal, and integrating ecological and population monitoring into surveillance systems;^{7,2} e) 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;^{7,1} f) <u>when dealing with wildlife disease that impact livestock and/or human health, implementing risk communication that simultaneously provides information on risks and the value of these species in ecological and sociocultural systems;</u> 	<p>Updated language</p>	<p>6. <i>Requests</i> Parties and others managing migratory wildlife to develop and evaluate strategies for prevention, preparedness and response to wildlife health threats by:</p> <ul style="list-style-type: none"> 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) ensuring plans and responses reflect One Health approaches, avoiding disease management actions that have adverse conservation impacts, c) 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, d) strengthening and supporting wildlife health and disease surveillance, with biodiversity conservation as a goal, and integrating ecological and population monitoring into surveillance systems, e) 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, f) when dealing with wildlife disease that impact livestock and/or human health, implementing risk communication that simultaneously provides

Text from Existing Resolution	Commentary	Clean New Text Proposed (including new numbering of the operative paragraphs)
		information on risks and the value of these species in ecological and sociocultural systems;
<i>Information sources for tackling health problems</i>	Retain	<i>Information sources for tackling health problems</i>
<p>7. Encourages Parties to inform their planning for wildlife health by:</p> <ul style="list-style-type: none"> 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 b) <u>making use of the key messages from the CMS report on <i>Examining Resolutions and Articles from CMS to find Strategic Opportunities for the Working Group on Migratory Species and Health</i> (as summarized in Annex 3 to UNEP/CMS/COP15/Doc.28.5) that recognize shared root causes of population decline and ill health and call for greater impetus for fulfilment of other obligations under the Convention to bring about more efficient and effective double benefits to improvements to both health and conservation status.</u> c) <u>making use of the lessons from the CMS report on <i>One Health Case Studies: a resource for Parties to the Convention on Migratory Species</i> (as summarized in Annex 3 to the UNEP/CMS/COP15/Doc.28.5), which, inter alia, reflect the need for cross-sectoral working for maximizing health benefits, and</u> d) 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; 	Updated language	<p>7. Encourages Parties to inform their planning for wildlife health by:</p> <ul style="list-style-type: none"> a) taking note of the CMS Migratory Species and Health Review and implementing its key recommendations where relevant, b) making use of the key messages from the CMS report on <i>Examining Resolutions and Articles from CMS to find Strategic Opportunities for the Working Group on Migratory Species and Health</i> (as summarized in Annex 3 to UNEP/CMS/COP15/Doc.28.5) which recognize shared root causes of population decline and ill health and call for greater impetus for fulfilment of other obligations under the Convention to bring about more efficient and effective double benefits to improvements to both health and conservation status, c) making use of the lessons from the CMS report on <i>One Health Case Studies: a resource for Parties to the Convention on Migratory Species</i> (as summarized in Annex 3 to UNEP/CMS/COP15/Doc.28.5), which, inter alia, reflect the need for cross-sectoral working for maximizing health benefits, and d) making proactive use of the substantial existing guidance provided by intergovernmental and other organizations on how to manage and respond to

Text from Existing Resolution	Commentary	Clean New Text Proposed (including new numbering of the operative paragraphs)
		wildlife diseases and to share best practice guidelines and experience;
<i>Knowledge gaps and prioritization</i>	Retain	<i>Knowledge gaps and prioritization</i>
8. <i>Encourages</i> Parties to address the significant knowledge gaps concerning the <u>drivers, epidemiology and drivers impacts</u> of many diseases of migratory species that prevent good health management, and <i>further encourages</i> Parties to support research and resourcing targeted at priority health threats to migratory species, particularly those of unfavourable conservation status;	Updated language	8. <i>Encourages</i> Parties to address the significant knowledge gaps concerning the drivers, epidemiology and impacts of many diseases of migratory species that prevent good health management, and <i>further encourages</i> Parties to support research and resourcing targeted at priority health threats to migratory species, particularly those of unfavourable conservation status;
<i>Cooperation</i>	Retain	<i>Cooperation</i>
9. <i>Invites</i> Parties to <u>support improvements and</u> contribute voluntarily to rapid reporting systems for wildlife morbidity and mortality events in collaboration with WOAHP national delegates and wildlife focal points, taking fully into account the WOAHP World Animal Health Information System (WAHIS), the joint FAO WOAHP WHO Global Early Warning System for health threats and emerging risks at the human-animal ecosystems interface (GLEWS+), and existing and emerging health information systems provided by FAO, WOAHP and WHO, using existing national and regional information systems, and the need to complement existing communication channels, specifically taking advantage of existing communication channels, inter alia, WOAHP disease reporting and ProMed-mail;	Updated language	9. <i>Invites</i> Parties to support improvements and contribute voluntarily to rapid reporting systems for wildlife morbidity and mortality events in collaboration with WOAHP national delegates and wildlife focal points, taking fully into account existing and emerging health information systems provided by FAO, WOAHP and WHO, using existing national and regional information systems, and taking advantage of existing communication channels, inter alia, WOAHP disease reporting and ProMed-mail;
10. <i>Calls on</i> Parties to collaborate with and share information simultaneously with <u>organizations linking wildlife health with conservation monitoring data, inter alia, WOAHP national delegates and wildlife focal points, WOAHP</u>	Updated language	10. <i>Calls on</i> Parties to collaborate with and share information simultaneously with organizations linking wildlife health with conservation monitoring data, inter alia, WOAHP national delegates and wildlife focal points,

Text from Existing Resolution	Commentary	Clean New Text Proposed (including new numbering of the operative paragraphs)
WAHIS, the IUCN Wildlife Health Specialist Group, the joint FAO–WOAH–WHO GLEWS and existing regional information systems;		WOAH WAHIS, the IUCN Wildlife Health Specialist Group, the joint FAO–WOAH–WHO GLEWS ² and existing regional information systems;
11. <i>Encourages</i> 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;	Updated punctuation	11. <i>Encourages</i> 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 work together with those responsible for implementation of the WHO Pandemic Agreement, which recognizes that pandemic prevention is dependent on “resolute action on the [...] environmental [...] determinants of health” 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;	Updated language	12. <i>Urges</i> CMS focal points and ministries responsible for wildlife to work together with those responsible for implementation of the WHO Pandemic Agreement, which recognizes that pandemic prevention is dependent on “resolute action on the [...] environmental [...] determinants of health”;
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;	Retain	13. <i>Encourages</i> 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;

² Global Early Warning System for health threats and emerging risks at the human–animal–ecosystems interface

Text from Existing Resolution	Commentary	Clean New Text Proposed (including new numbering of the operative paragraphs)
<i>Funding needs</i>	Retain	<i>Funding needs</i>
14. <i>Requests</i> Parties and international donor organizations to support the implementation of this Resolution and the work of the CMS <u>Working Group on Migratory Species and Health</u> 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;	Updated language	14. <i>Requests</i> Parties and international donor organizations to support the implementation of this Resolution and the work of the CMS Working Group on Migratory Species and Health 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. <i>Calls on</i> Parties and international donor organizations to provide technical and financial support to assist low- and middle-income countries in establishing appropriate <u>pollutant, pathogen and disease surveillance</u> in wildlife populations, and management and control of wildlife diseases, including outbreak management; and	Updated language	15. <i>Calls on</i> Parties and international donor organizations to provide technical and financial support to assist low- and middle-income countries in establishing appropriate pollutant, pathogen and disease surveillance in wildlife populations, and management and control of wildlife diseases, including outbreak management; and
<i>CMS engagement</i>	Retain	<i>CMS engagement</i>
16. <i>Requests</i> the Secretariat to provide support for the <u>Working Group on Migratory Species and Health</u> Working Group in the development and implementation of its Programme of Work, and to promote cooperation with the Quadripartite, <u>the</u> One Health High-Level Expert Panel and CITES.	Updated language	16. <i>Requests</i> the Secretariat to provide support for the Working Group on Migratory Species and Health in the development and implementation of its Programme of Work, and to promote cooperation with the Quadripartite, the One Health High-Level Expert Panel and CITES.

CLEAN TEXT OF THE AMENDED RESOLUTION 12.6 (Rev.COP14)

WILDLIFE HEALTH AND MIGRATORY SPECIES

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* and developed significantly following increased CMS attention on health in Resolution 12.6 (Rev.COP14) *Wildlife Health and Migratory Species*,

Acknowledging that wildlife and ecosystem health, livestock and companion animal health, and human health are interdependent and influenced by multiple socioeconomic factors, and *concerned* about the impacts of emerging and re-emerging wildlife diseases that are being 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,

Conscious that infectious or non-infectious threats to wildlife health 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,

Further acknowledging that the environment is the setting (place and context) and a determinant for health and that conservation measures to create and maintain 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,

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 particular risks of spreading pathogens and causing emergence of infectious diseases in wildlife, domestic animals and/or humans posed by wildlife trade where crowded conditions, stress and injury, and close proximity to people during capture, farming, transportation, marketing and butchering create opportunities for transmission between animals and potentially to people, *further acknowledging* risks related to the pet trade and other regional or international movements of animals and animal products, while, at the same time, *welcoming* the collaborative efforts of CITES, FAO and the World Organisation for Animal Health (WOAH) to address such risks,

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 mortality and morbidity, sometimes with subsequent 'spillback' of these pathogens into 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,

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

Acknowledging that the One Health approach is now recognized 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 the One Health High-Level Expert Panel (OHHLEP), the Quadripartite partners (FAO, WOA, WHO and UNEP), IUCN, UNICEF and the World Bank, and is used within the WHO Pandemic Agreement; and *further welcoming* the consensus on appropriate approaches and responses to wildlife health that have developed among UN agencies, multilateral environmental agreements and other international organizations, reflected, for example, in decisions and resolutions of the Ramsar Convention on Wetlands, AEWA and CMS,

Welcoming the Pandemic Agreement which recognizes the importance of the environment and stresses that adequate pandemic prevention, preparedness, response and health systems recovery is part of a continuum to combat other health emergencies and achieve greater health equity through resolute action on the social, environmental, cultural, political and economic determinants of health,

Further welcoming the significant work in the area of wildlife health by FAO, the Working Group on Wildlife Diseases of the WOA, 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, 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 are often inadequate, being limited by surveillance and knowledge gaps, and 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, conservationists, natural resource professionals, and Indigenous Peoples and local communities for planning and responding to the complex issues surrounding human, animal and ecosystem health,

Welcoming the focus on wildlife health by the CMS and establishment of the CMS Working Group on Migratory Species and Health of the Scientific Council as a mechanism for further elaborating and coordinating this work on issues related to health of migratory species and additionally 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; the Asia-Pacific Illegal Taking of Migratory Birds Intergovernmental Task Force; and the Working Group on Climate Change, and

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

1. *Urges* Parties to recognize the links between the drivers of population decline and disease emergence, and urgently enhance actions to address these by, inter alia, reducing habitat loss, fragmentation and degradation; addressing drivers of climate change and enhancing mitigation and adaptation; preventing pollution; preventing the spread of invasive non-native species; addressing high-risk agricultural and aquacultural practices; preventing overexploitation; and reducing health risks at wildlife/livestock and wildlife/human interfaces;
2. *Urges* Parties and others to minimize the risk of infectious disease to wildlife and pathogen spillover by:
 - a) taking robust measures at livestock-wildlife interfaces, inter alia, those linked to agriculture and aquaculture and encroachment into wild areas, pastoralism, improving biosecurity, domestic animal vaccination as appropriate and better planning and reassessment of intensive animal production where health risks have been identified,
 - b) implementing measures 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
 - c) focusing efforts on reducing or otherwise managing those practices that are high risk for pathogen transfer and drivers of pathogen change;
3. *Encourages* Parties and others to take actions to minimize non-infectious negative impacts on wildlife health by, inter alia:
 - a) reducing and mitigating pollutants and poisons, particularly where regulatory restriction and/or enforcement is required,
 - b) taking strong management actions to prevent pollutants and poisons from entering aquatic systems and working to restore marine and freshwater habitats of migratory species,
 - c) mitigating human-induced injury of wildlife (inter alia, in infrastructure and other human developments and activities), and
 - d) 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, inter alia, 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 wildlife health problems

6. *Requests* Parties and others managing migratory wildlife to develop and evaluate 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) ensuring plans and responses reflect One Health approaches, avoiding disease management actions that have adverse conservation impacts,
 - c) 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,
 - d) strengthening and supporting wildlife health and disease surveillance, with biodiversity conservation as a goal, and integrating ecological and population monitoring into surveillance systems,
 - e) 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,
 - f) when dealing with wildlife disease that impact livestock and/or human health, implementing risk communication that simultaneously provides information on risks *and* the value of these species in ecological and sociocultural systems;

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 and implementing its key recommendations where relevant,
 - b) making use of the key messages from the CMS report on *Examining Resolution and Articles from CMS to find Strategic Opportunities for the Working Group on Migratory Species and Health* (as summarized in Annex 3 to UNEP/CMS/COP15/Doc.28.5) which recognize shared root causes of population decline and ill health and call for greater impetus for fulfilment of other obligations under the Convention to bring about more efficient and effective double benefits to improvements to both health and conservation status,
 - c) making use of the lessons from the CMS report on *One Health Case Studies: a resource for Parties to the Convention on Migratory Species* (as summarized in Annex 3 to UNEP/CMS/COP15/Doc.28.5), which, inter alia, reflect the need for cross-sectoral working for maximizing health benefits, and
 - d) 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 drivers, epidemiology and impacts 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 support improvements and contribute voluntarily to rapid reporting systems for wildlife morbidity and mortality events in collaboration with WOA national delegates and wildlife focal points, taking fully into account existing and emerging health information systems provided by FAO, WOA and WHO, using existing national and regional information systems, and taking advantage of existing communication channels, inter alia, WOA disease reporting and ProMed-mail;
10. *Calls on* Parties to collaborate with and share information simultaneously with organizations linking wildlife health with conservation monitoring data, inter alia, WOA national delegates and wildlife focal points, WOA WAHIS, the IUCN Wildlife Health Specialist Group, the joint FAO–WOA–WHO GLEWS² 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* CMS focal points and ministries responsible for wildlife to work together with those responsible for implementation of the WHO Pandemic Agreement which recognizes that pandemic prevention is dependent on “resolute action on the [...] environmental [...] determinants of health”;
13. *Encourages* 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 Working Group on Migratory Species and Health 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 pollutant, pathogen and disease surveillance in wildlife populations, and management and control of wildlife diseases, including outbreak management; and

² Global Early Warning System for health threats and emerging risks at the human–animal–ecosystems interface

CMS engagement

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

ANNEX 2**DRAFT DECISIONS****WILDLIFE HEALTH*****Directed to the Scientific Council***

- 15.AA The Scientific Council is requested, subject to the availability of resources, to:
- a) update, as appropriate, the Terms of Reference of the Working Group on Migratory Species and Health,
 - b) through the Working Group on Migratory Species and Health and the Scientific Task Force on Avian Influenza and Wild Birds, provide any recommendations on issues related to migratory species and health, as appropriate,
 - c) convene a workshop to further develop the niche of the Working Group to maximize wildlife health impacts,
 - d) further develop and implement the Programme of Work of the Working Group on Migratory Species and Health and prioritize activities,
 - e) strengthen the mainstreaming of health into other Scientific Council workstreams and CMS activities, and
 - f) strengthen collaborative relationships with other intergovernmental initiatives that can deliver conservation and health benefits.

Directed to the Secretariat

- 15.EE The Secretariat shall, subject to the availability of resources:
- a) support the Scientific Council in the implementation of Decision 15.AA,
 - b) develop a devoted section on the CMS website with resources and guidance to support Parties in implementing Resolution 12.6(Rev.COP15), and
 - c) liaise with FAO to finalize the Terms of Reference of the CMS–FAO co-convened Scientific Task Force on Avian Influenza and Wildlife.

**REPORT OF THE WORKING GROUP ON MIGRATORY SPECIES AND HEALTH:
KEY MESSAGES FROM THE ‘CMS RESOLUTIONS AND HEALTH ANALYSIS’¹ AND
THE ‘ONE HEALTH CASE STUDIES’² REPORTS**

The Working Group on Migratory Species and Health provides a focus for CMS involvement in issues related to migratory species and health. Its role is to increase attention to health issues, define a key role for CMS, and advise Parties on promoting health (UNEP/CMS/ScC-SC7/Outcome 2).

Wildlife health includes “the physical, physiological, behavioural, and social well-being of wild-living animals measured at an individual, population and wider ecosystem level, and their resilience to change.” (UNEP/CMS/COP14/Inf.30.4.3.).

The CMS Migratory Species and Health Review specifically recommends promoting the health of migratory species by tackling the drivers of population decline, in effect encouraging implementation of multiple existing mandates under CMS (UNEP/CMS/COP14/Inf.30.4.3.).

Preventative approaches to managing health are more cost-effective than addressing problems once they emerge. (CMS Resolution 12.6 (Rev. COP14)).

- Governments, international forums and multilaterals want to advance preventative measures by holistically managing health, conservation and socioeconomic concerns at multiple scales in a more coordinated and integrated fashion.
- Protecting and restoring biodiversity and ecosystems is a prerequisite to the health of people, animals, plants and ecosystems which, in turn, underpin conservation and sustainable development.
- Multisectoral coordination, collaboration and engagement are critical to finding shared paths forward to protect the social and ecological value of healthy wildlife.
- One Health has been defined as “*an integrated, unifying approach that aims to sustainably balance and optimize the health of people, animals and ecosystems. It recognizes the health of humans, domestic and wild animals, plants, and the wider environment (including ecosystems) are closely linked and inter-dependent*”. One Health has been endorsed by multiple international organizations including the Quadripartite of UNEP, FAO, WOA, and WHO, and others such as UNICEF and the World Bank.
- One Health provides an opportunity to overcome the challenges that have limited cross-sectoral initiatives critical to preserving healthy, resilient populations of migratory species while providing co-benefits for public health and food security.
- With more explicit attention to the interdependence of conservation and health, One Health could create long-term conservation benefits while also promoting public health security.

¹ UNEP/CMS/COP15/Inf.28.5b

² UNEP/CMS/COP15/Inf.28.5a

Lessons extracted from *Examining Resolutions and Articles from the Convention on the Conservation of Migratory Species (CMS) to find strategic opportunities for the Working Group on Migratory Species and Health.*

Alignment of existing resolutions with contemporary definitions of wildlife health

The drivers of population declines and extinction overlap with the drivers of suboptimal health and disease.

- Bridging wildlife conservation and health can provide strategies to concurrently address determinants of population health and resilience and drivers endangering wildlife health and sustainability.

Many CMS resolutions provide mandates to sustain root causes of good health, maintain adaptive capacity, respond to known impacts and/or reduce vulnerability to harms, and are thus able to bridge wildlife health and conservation.

- The current CMS resolutions address several root causes of wildlife health. Future resolutions should expand actions against known risky circumstances in advance of serious harm and support integrated responses to known health threats to more comprehensively address health threats and other determinants of wildlife health.

Areas where the CMS Working Group on Migratory Species and Health can support health-enabling actions

Refine an operational definition of wildlife health to establish the CMS wildlife health scope of practice.

- Clarify the CMS' health priorities, find opportunities to bridge health and conservation programmes, and reveal pathways to connect resolutions and programmes.

Use evidence-based advocacy for advancements in health intelligence for better situational awareness that informs strategic actions.

- Health intelligence identifies actionable signals of change, provides insight into future risk trajectories, and characterizes possible opportunities for intervention in advance of harm.
- A network of partnerships that brings together different information and perspectives is needed to make better use of what is already being done by consistently integrating and communicating emerging knowledge.

Close the gap between CMS mandates and action by brokering knowledge, promoting evidence-based decision-making, and identifying pragmatic and adaptable solutions.

- Increased attention must be directed to evidence synthesis for actions that address exposure to hazards and threats, as well as sensitivity and adaptability to those hazard and threats before intolerable harms occur.
- Parties should be encouraged to share experience and knowledge on effective means to realize health and conservation co-benefits, and to create the human resources capable of identifying and acting on opportunities for co-benefits advanced by CMS resolutions.

Promote interventions that benefit multiple interests by addressing root causes of health and risk through collaborations with other experts and agencies.

- The Working Group can champion wildlife-centred One Health through advocacy and evidence such that conservation commitments are honoured and addressed in One Health actions.
- The Working Group can contribute to CMS instruments and initiatives that encourage collaborations that concurrently contribute to conservation, sustainable development and health security for people, domestic animals and wildlife.
- Other parties, including WHO, WOAHA and FAO, should be supported to ensure the wildlife health implications of One Health interventions and policies address conservation goals for migratory species.

Increase capacity to contribute to opportunities to promote and protect health throughout CMS resolutions.

- Support Parties to realize the efficiency and impacts that can be gained through integrated approaches to concurrently protecting the root sources of health and conservation.
- Increased attention to actions that reduce vulnerability would bolster CMS activities against a wider suite of drivers of harm and determinants of health before significant harms occur, thus increasing its preventative actions.
- Focusing on the root causes of health and vulnerability would promote actions that build resilience and reduce risk for other sectors, including public health and agriculture.

Lessons extracted from *One Health Case Studies: a resource for Parties to the Convention on Migratory Species*

Rationale for evolving and implementing CMS One Health strategies

Health and conservation of ecosystems and wild populations are highly interdependent as well as being interconnected to societal health and sustainable development.

There is significant imbalance between the focus on health benefits for people and food systems and the health of wildlife and ecosystems in most One Health case studies, with the latter two suffering from a lower profile and less investment. There is a need for greater equity in One Health approaches, which would help maximize benefits across sectors.

- Information on effective One Health initiatives with migratory species health at the centre are difficult to find and are often framed around identifying potential solutions but lack action to implement them.
- There are important gaps in One Health policy affecting migratory species health. Wildlife is too often seen as the source of human or domestic animal disease rather than victims of disease. There is also too little recognition of the health benefits of resilient ecosystems.

Conservation and health are connected

- Governments, international forums, multilaterals and civil society are increasingly advocating for health, environmental issues and socioeconomic drivers to be managed holistically across sectors and at multiple scales in a more coordinated and integrated fashion.
- Protecting and restoring biodiversity and ecosystems is a prerequisite to the health of people, animals, plants and ecosystems which, in turn, underpin conservation and sustainable development.

Preventative and reactive One Health approaches are connected parts of a health programme

- One Health approaches are more effective when they are preventative and address multiple health issues in conjunction by working on determinants of health and drivers of harms.
- Responses to disease outbreaks in both wild and domestic settings require One Health approaches, and their effectiveness is dependent on preparedness – particularly given that cross-sectoral working is required for successful outcomes.

A key feature of successful One Health implementation is effective collaboration

- Individual sectors are unlikely to have the ability to implement One Health approaches as key decision-making will lie outside their jurisdiction, thus structures that enable collaboration and cross-sectoral working are required.
- While different sectors may have different priorities, finding a common goal can support successful collaboration.
- Communication and training that better connects health and conservation perspectives and priorities could help overcome resistance to implementing coordinating mechanisms and processes for integrated actions.

There are economic efficiencies to be made

- Effective One Health approaches rely on cross-sectoral collaboration, which also bring efficiencies.
- Resource limitations coupled with the trend for independent response to interconnected conservation and health issues leads to inefficient actions.
- The case studies show how efficiencies and positive impacts can be increased when multiple needs and priorities are concurrently co-managed.

International cooperation is put into action through local capacity

- International cooperation is needed to enable a coordinated implementation of One Health across Range States.
- One Health approaches can operate at multiple scales. For migratory species range-scale initiatives are important; however, many issues may require local tailoring for specific key stakeholders.

- Building on existing networks and capacities can provide locally feasible and acceptable pathways to implementation.
- The case studies illustrate the need to approach migratory species health, and its One Health implications, as both a local and global issue.

Addressing multiple health issues in conjunction is beneficial for health and for conservation

- The case studies show how, when people work together across sectors to address multiple problems through integrated policy or interventions, co-benefits can be found.
- Innovations in information-sharing across locations, perspectives and knowledge systems would create a more holistic view of the status of threats to migratory species and action priorities.
- Learning from the case studies suggest that integrated One Health actions can be enabled by a health framework that involves collaboration between veterinary, public health and wildlife conservation sectors.

ANNEX 4

REPORT OF ACTIVITIES BY THE CMS–FAO SCIENTIFIC TASK FORCE ON AVIAN INFLUENZA AND WILDLIFE SINCE COP14

Input of conservation aspects to intergovernmental highly pathogenic avian influenza (HPAI) policy and strategy development:

- Contribution of wildlife perspectives to the World Organisation for Animal Health (WOAH) and the Food and Agriculture Organization of the United Nations (FAO) [Global Strategy for the Prevention and Control of High Pathogenicity Avian Influenza \(2024-2033\)](#).
- Contribution of wildlife perspectives to Technical Meeting of [OFFLU](#), held at FAO, Rome, 2-4 July 2024. Prioritization of [Wildlife Group](#)'s work on planning of a global wildlife situation update.
- Presentation and contribution to FAO in Geneva on [One Health Briefing on Avian Influenza: Preparedness and Coordinated Response](#), 8 October 2024.
- Organization of a joint AEWA, CMS and FAO side event for AEWA MOP9 (November 2025) with HPAI-specific text and recommendations added to AEWA Resolution 9.2 on Implementation of the AEWA Strategic Plan, and a summary of impacts and recommendations added to the AEWA Conservation Status Report 9. Communication of HPAI outputs of CMS COP14 to AEWA National Focal Points, along with note to Parties on importance of waterbird monitoring in relation to HPAI.
- Contribution as member of the Advisory Group for the FAO Global Science, Policy and Private Sector Dialogue on 'Tackling high pathogenic avian influenza (HPAI) together', Foz do Iguacu, Brazil, 9-11 September 2025.
- Contribution of UNEP perspectives to the 'Quadripartite strategic framework to address threats from zoonotic influenza at the animal-human-environment interface' (due for release by WHO later in 2025).

Progress on updated Guidance Statement from the Task Force

As a follow-up to the Task Force's well-received [2023 Statement](#) with its substantive guidance on responses to avian influenza, an updated statement is in development with the OFFLU Wildlife Group (of which the Coordinator is a member), bringing together an accurate global situation update, to which more recently produced guidance for Parties and other stakeholders will be appended.

Communication and outreach with stakeholders and wider audiences

The Coordinator:

- served on the Scientific Committee of the International Symposium of Avian Influenza held in June 2025, in St. Johns, Newfoundland, Canada. As an invited speaker, the Coordinator presented on the conservation impacts and needs of the global HPAI community. A scientific paper based on the presentation is in development.
- presented to the European Wildlife Disease Association on leveraging conservation and policy action on HPAI, Stralsund, Germany, 9-13 September 2024.

- presented, with other Task Force members and the CMS Secretariat, as part of a joint [UNESCO, CMS, FAO, Ramsar, IUCN webinar series on HPAI](#) (three in total, April and May 2024) on 'Avian influenza - protecting wildlife in UNESCO World Heritage sites, Biosphere Reserves and Ramsar sites'.
- assisted with the organization of an HPAI side event at the 2025 IUCN World Conservation Congress, Abu Dhabi, October 2025.
- supported a BirdLife webinar on HPAI in April 2025.
- provided various media interviews and lectures to universities about impacts of HPAI on wildlife and need for One Health approaches.