CONVENTION ON INTERNATIONAL TRADE IN ENDANGERED SPECIES
OF WILD FAUNA AND FLORA

Seventy-seventh meeting of the Standing Committee
Geneva (Switzerland), 6–10 November 2023

Strategic Matters

ROLE OF CITES IN REDUCING RISK OF FUTURE ZOONOTIC DISEASE EMERGENCE
ASSOCIATED WITH INTERNATIONAL WILDLIFE TRADE

1. This document has been submitted by Germany and the Undersigned Members of the International Alliance Against Health Risks in Wildlife Trade in relation to agenda item 17 of the 77th meeting of the Standing Committee, the Role of CITES in reducing risk of future zoonotic disease emergence associated with international wildlife trade.*

Background on the Alliance:

2. Mission and Purpose: The International Alliance against Health Risks in Wildlife Trade ("the Alliance") is a collaborative initiative committed to addressing the critical issue of pathogen spillover from wildlife trade and markets. It was launched in 2020 by the Federal Ministry for Economic Cooperation and Development and the Federal Ministry for the Environment, Nature Conservation, Nuclear Safety and Consumer Protection of Germany. Its international launch took place during the IUCN World Conservation Congress in Marseille on 6 September 2021. The primary goal is to better understand and mitigate health risks associated with wildlife trade, ensuring the health and well-being of both human and animal populations.

3. Goals of the Alliance:
   • Goal 1: Substantially reduce the risks of zoonotic spillover and enhance responses, including behavioural changes, to mitigate human and animal health risks stemming from direct and indirect contact with wildlife and their products along the wildlife trade chain.
   • Goal 2: Foster international and national awareness, knowledge, and policies aligned with Goal 1, bridging the gap between scientific understanding and practical implementation.

4. Mission Statement: The Alliance serves as an inclusive, open, and collaborative platform where stakeholders unite to confront the threat of pathogen spillover from wildlife trade and markets. Its mission involves providing and disseminating evidence, supporting interventions, and thereby reducing the risk of future outbreaks, epidemics, and pandemics. Its commitment extends to improving health, equity, and overall well-being for all species through a One Health approach.

Support for Alliance Goals and Mission:

5. Application of Precautionary Principle: Where the evidence base on specific health risks is currently weak, the Alliance will strive to close knowledge gaps. Wherever potential health risks are acknowledged, even if not proven, the precautionary principle is applied, and the Alliance will work towards behaviour change, reducing both demand for and trade in wildlife specimen and wildlife products. In those instances where this kind of contact with and consumption of wildlife cannot or should not be prevented the Alliance will help identify ways to limit any negative impact on human health, biodiversity, and sustainable coexistence, by fostering exchange, gathering evidence, and enabling recommendations.

* The geographical designations employed in this document do not imply the expression of any opinion whatsoever on the part of the CITES Secretariat (or the United Nations Environment Programme) concerning the legal status of any country, territory, or area, or concerning the delimitation of its frontiers or boundaries. The responsibility for the contents of the document rests exclusively with its author.
6. Inclusive Approach: The Alliance emphasizes the importance of fostering an inclusive approach, recognizing and respecting cultural identity, Indigenous Peoples’ rights, and the diversity of knowledge and practices, including traditional and indigenous knowledge systems. It is crucial to understand that human behaviour, rather than wildlife, poses risks to human health, and the Alliance strives to promote this understanding.

7. The Alliance firmly believes that its collaborative efforts align with the objectives of CITES and contribute to the broader mission of enhancing health, equity, and well-being for all species through a One Health approach.

8. The Alliance is committed to working collaboratively with relevant stakeholders, including CITES, to achieve the shared goals of reducing health risks associated with international wildlife trade. The Alliance welcomes opportunities for ongoing dialogue and collaboration to address these critical issues.

9. For more information about the International Alliance against Health Risks in Wildlife Trade visit: https://alliance-health-wildlife.org/.

Signatories of the Alliance’s institutional and individual expert membership (in alphabetical order):

1. Belize Wildlife & Referral Clinic
2. Born Free
3. Centre for One Health, Indian Institute of Public Health Gandhinagar
4. Centre for One Health Research, University of Washington
5. EcoHealth Alliance
6. FOUR PAWS
7. Friedrich-Loeffler-Institute (German Federal Research Institute for Animal Health)
8. Global Initiative to End Wildlife Crime
9. Health In Harmony
10. Humane Society International
11. IBC (International Buddhist Confederation, Environment and Conservation Committee)
12. IFAW (International Fund for Animal Welfare)
13. IUBS (International Union of Biological Sciences)
14. IUCN (International Union for Conservation of Nature)
15. IZW (Leibniz Institute for Zoo and Wildlife Research)
16. Max-Planck Institute of Animal Behavior (formerly ‘Institute for Ornithology’)
17. NABU (International – Foundation for Nature)
18. OHLAIC (One Health Latinoamerica + Ibero y el Caribe)
19. One Health Colombia
20. PAN (African Sanctuary Alliance)
21. PREZODE Initiative
22. Pro Wildlife
23. SEAOHUN (Southeast Asia One Health University Network)
24. TRAFFIC (Trade Records Analysis of Flora and Fauna in Commerce)
25. Wageningen University & Research
26. WCS (Wildlife Conservation Society)
27. World Animal Protection
28. WWF (World Wide Fund For Nature)

Individual expert members:
29. Dr. Adeyinka Jeremy Adedeji
30. Dr. John Joseph Bassey
31. Dr. Alice C. Hughes
32. Dr. Michele Miller
33. Sonja Rossmann
34. Dr. Craig Stephen