MMI takes this opportunity to address agenda 12.5. The statement is supported by PHM and TWN.

We share the Review Group's main observation that PIP Framework is an innovative tool and has improved pandemic preparedness.

Access to and the use of sequence data should trigger benefit sharing and databases that wish to host sequence data should implement a standard user agreement that applies benefit sharing obligations of the Framework to users and tracks users of sequence data.

As stated in Recommendation 12 of the Review, the definition of the PIP biological material in the Framework should be amended to explicitly include GSD.

We stress that the CBD and Nagoya Protocol are the forum with competence to determine if the PIP Framework should be considered to be a specialized instrument of the Nagoya Protocol.

A70/57 is clear that the CBD is undertaking a study into criteria and process for determining an it as a specialized instrument, as such WHO Members should wait and be guided by the Study and its consideration by the Parties of the CBD and Nagoya Protocol in 2018.

We call for the amount of Partnership Contribution that should be paid by manufacturers, be updated given the increase in the running costs of WHO GISRS.

WHO Members need to initiate a process to address access and benefit sharing with regard to seasonal influenza viruses as annually thousands of seasonal flu viruses are being shared without fair and equitable benefit sharing.

Finally, A70/57 seeks guidance on access and benefit sharing with regard to other pathogens in emergency situations. This Assembly should set up an intergovernmental process to discuss and give guidance on this matter taking into account the experience of the PIP Framework of treating virus sharing and benefit sharing on an equal footing.