

STATEMENT

Statement on PABS Instrument at the seventh meeting of the Intergovernmental Working Group (IGWG 7) on the WHO Pandemic Agreement

6 JULY 2026, GENEVA – The extension of the negotiations provides an important opportunity to get the PABS right, and recent outbreaks such as Ebola and Hantavirus clearly highlight the practical challenges that these discussions must address.

We are concerned by emerging trends in how pathogens and data are being shared, which risk undermining the scientific response and the broader innovation ecosystem. Recent experience shows a clear shift away from open access systems historically used in outbreaks, toward more restricted-use arrangements.

In practice, this creates uncertainty for researchers on how data can be used and shared, and can slow the speed and breadth of scientific understanding at a time when rapid collaboration is essential. The use of such approaches during the Ebola response illustrates these risks, and early indications suggest that these dynamics are already affecting how stakeholders engage with available data.

This matters because PABS will not, in itself, generate medical countermeasures; its impact will depend on how it shapes access to pathogens and data which will either enable innovation or introduce delays and uncertainty that risk slowing it down.

The Hantavirus and Ebola outbreaks are the latest reminder both of the progress that has been made and of the gaps that remain. The R&D pipelines for emerging infectious diseases vaccines and therapeutics are critically thin and must be expanded. Introducing mandatory monetary contributions and other obligations would risk further weakening these pipelines by diverting scarce resources, disincentivizing investment and likely reduce company involvement.

While mechanisms such as CEPI play an essential “push” role for vaccines, helping to de-risk R&D investment and enable early-stage development, effective preparedness depends on a broader set of enabling conditions being in place before a crisis hits. These include regulatory agility, predictable financing, coordinated procurement, and strong health system delivery capacity. Without these

elements, even the most advanced innovations cannot translate into timely access for patients on the ground.

We share the objective of ensuring equitable access to medical countermeasures and companies have demonstrated this commitment repeatedly through proactive and voluntary engagement across public health emergencies, including COVID-19, mpox, and Ebola. However, introducing a cumbersome PABS system will not improve preparedness or access outcomes. In practice, the main bottlenecks have consistently been related to financing, regulation, and delivery - not supply.

Looking ahead, it is critical that we do not jeopardize the progress achieved in the Pandemic Agreement, including the set-aside mechanism, by introducing a PABS system that is impractical for research and potentially counterproductive. Negotiations should remain grounded in outbreak reality and reduce rather than increase both legal uncertainty and the restrictions that could delay scientists' ability to access and use pathogen data.

Instead, we should build on existing mechanisms that already enable rapid, open, and effective data sharing, including established international databases, while ensuring that countries are supported and enabled to operationalize agreed access provisions.

Strengthening what works in practice will be essential to support innovation, accelerate response, and ultimately deliver equitable access to medical countermeasures.