Statement by the South Centre to the Open-ended Intergovernmental Working Group on the WHO Pandemic Agreement, Ninth Session (IGWG9)

10 November 2026

The Pathogen Access and Benefit Sharing System (PABS), implementing Article 12, will be a core part of the Pandemic Agreement. The South Centre offers suggestions in the interest of convergence on the draft text during IGWG9.

First, Parties should share pathogen materials and sequences primarily through the PABS system, creating legal certainty on the terms for access and for benefit sharing. Common rules should apply, with rapid access and benefit sharing on an equal footing, as Article 12 requires. The users who follow PABS terms would not have further benefit sharing obligations under national ABS laws for the matters the standard PABS contracts cover, giving them legal certainty. Article 1 bis follows this approach, while allowing the system to be tested and reviewed. We consider it important to work towards convergence on Article 1 bis.

Second, when the WHO Coordinated Laboratory Network shares materials with third parties, a standard material transfer agreement should apply. For recognized PABS sequence databases, users should sign and accept standard terms of use including expected benefit sharing. Sharing via federated national or regional nodes, as an alternative to depositing into databases, deserves consideration.

Third, manufacturers should sign standard, legally binding WHO PABS standard contracts. Commercial users other than participating manufacturers, including developers who do not manufacture, should notify WHO of use. WHO would then clarify the benefit sharing due, based on the standard contractual terms.

An important question is how the system's design can encourage manufacturers to sign up. Standard terms for all manufacturers in standard WHO PABS contracts, proportionate obligations and no duplication would offer the strong incentive of legal certainty via the PABS route. Downstream Party measures can also encourage signature.

Finally, the operation of PABS could be made conditional to a minimum threshold of contracts being signed by manufacturers with WHO, without prejudice to the compliance with the obligations under the signed contracts.

The South Centre remains available to support the IGWG process. We welcome further discussion on options for a robust PABS architecture fully in compliance with Article 12.