



BRIEFING FOR PSI AFFILIATES

February 2026

This document gathers fundamental information about the ongoing negotiations regarding a Pathogen Access and Benefit-Sharing (PABS) system and PSI's position.

Why is the PABS system important?

The Pathogen Access and Benefit-Sharing (PABS) system proposed in Article 12 of the Pandemic Treaty represents a crucial mechanism to operationalize equity in the Pandemic Agreement. It is a system that seeks to regulate how access to materials that will be used to develop health technologies (for example, pathogens, biological materials, genetic sequences, among others) occurs and the counterpart that countries/companies providing such materials should offer to those countries. We advocate that these mechanisms must be legally binding, transparent, and administered multilaterally by WHO under the oversight of Member States.

About the process

The current negotiation is an offshoot of the Pandemic Treaty negotiations. In May 2025, during the 78th World Health Assembly, when the Pandemic Treaty was approved, it was decided, due to the complexity and political divergences, that the PABS Annex (Pathogen Access and Benefit-Sharing) would be negotiated separately from the main text to be negotiated on a specific track.

Since then, the process has advanced through dedicated meetings of the Intergovernmental Working Group (IGWG). In the week of 02/08, the 5th round of negotiations will begin, a critical moment where pressure to close the text threatens the quality and equity of the final instrument.

Given the evolution of the PABS annex negotiations, we are concerned that the new system will not go beyond the status quo that allowed the tragedy experienced during the pandemic. There is a worrying approach in current negotiations to severely "slim down" the PABS Annex text, diluting or eliminating important elements. We see proposals from the WHO Secretariat and the Global North that continue to favor interests that do not align with public health equity. The next round (5th) takes place between 02/09 to 02/13. The 6th will take place in March (23-27). Therefore, even with few days until the start of the 5th round of negotiation, it is essential to send the letters, considering the importance of the issue and that there is still a possibility to influence the text in the 6th round.

What is PSI asking from affiliates?

We are sending along with this communication, a position paper and a model letter. We ask affiliates to adapt this letter and send it to their governments (Ministry of Health and Ministry of Foreign Affairs) along with the position paper.

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EUAN GIBB



On political demands:

It is time to pressure governments in our region to ensure that the PABS system guarantees equity in future health emergencies.

Once again, we face a confrontation between Global North and Global South countries. While Global South countries seek to include measures to guarantee equity and commitments to benefit-sharing, Global North countries work to leave "everything as it is," maintaining historical colonial relations: Global South countries "provide" data, genetic sequences, biodiversity and Global North countries sell vaccines, medicines and diagnostics.

To ensure a truly equitable system that does not reproduce historically unequal relations, the following points need to be in the approved text:

1. Multilateral and Binding System

- The PABS system must be administered multilaterally by WHO under democratic oversight of Member States.
- Voluntary commitments have proven to be ineffective. All recipients of materials or data must assume legally binding terms of use.
- We advocate for adoption under Article 21 of the WHO Constitution to ensure universal application and legal force.

2. Transparency and Standardized Contracts

- All actors accessing pathogens must sign standardized contracts with clear, public and auditable terms.
- All transactions and agreements with pharmaceutical laboratories must be fully transparent and subject to public audit.

3. Concrete Benefit-Sharing

Access to pathogens must be conditioned on measurable commitments.

- During emergencies, we demand a legal obligation to provide WHO with at least 20% of production in real time (10% free of charge and 10% at non-profit prices).
- Manufacturers must be required to provide production licenses and technology transfer to developing countries.

4. Sovereignty and Rights

- Countries have sovereign rights over their genetic resources and health data, as established by the Convention on Biological Diversity and the Nagoya Protocol.
- The PABS system should not exclude the application of national access and benefit-sharing systems.



What we ask from governments, especially from the Global South:

- Firmly reject any further attempts to "slim down" the PABS Annex text that eliminate essential safeguards.
- Resist pressure from bilateral agreements (such as U.S. contracts) that undermine global solidarity and condition humanitarian aid on data sharing.
- Defend the principle that health is a fundamental human right and cannot be subordinated to profit.

We are available to support the development of this agenda and collaboration with other affiliates in the region. If you have questions or wish to learn more about how to act on this issue, write to the Inter-Americas health sector coordinator, Pedro Villardi (pedro.villardi@world-psi.org)