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The 13th meeting of the INB - A crucial moment for the pandemic response

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The 13th meeting of the Intergovernmental Negotiating Body (INB) took place from February 17 to 21, 2025, in Geneva, marking a crucial phase in the negotiations on the proposed WHO Pandemic Agreement.

With only five official negotiation days left before the World Health Assembly (WHA) in May—where the agreement is set to be adopted—delegations are under immense time pressure. While some progress has been made, key contentious issues remain unresolved. These include the distribution of resources and technologies during a pandemic, access to pathogens (Pathogen Access and Benefit Sharing, PABS), technology transfer, and the definition and financing of prevention measures. Despite geopolitical tensions, there is cautious optimism that an agreement can be reached. The withdrawal of the United States from the negotiations initially created uncertainty but has also reinforced the determination of the international community to push forward and conclude the agreement successfully.

WHO Director-General Dr. Tedros Adhanom Ghebreyesus urged member states to finalize the agreement as a testament to the effectiveness of multilateralism: “This agreement should not fail on a word; it should not fail on a comma and it should not fail on a percentage. History will not forgive us if we fail to deliver on the mandate the world needs.” Delegates from several countries expressed optimism, emphasizing that an agreement is possible with additional commitment in the coming months. Representatives from India, Eswatini, and Norway also described the negotiations as constructive and highlighted significant progress already achieved. However, the

pressure remains high as the number of remaining negotiation days is limited.

Status of the Negotiations: Progress and Challenges

Discussions centered on particularly contentious articles of the draft agreement, including pandemic prevention and surveillance under the One Health approach, pathogen access and benefit-sharing, and technology transfer. While wealthier nations advocate for more comprehensive prevention measures, developing countries insist on greater financial support and fair distribution mechanisms for medical resources.

Access to pathogens and their use for vaccine development remain a core issue, especially regarding the fair distribution of benefits derived from them. Although detailed regulations are to be developed later by an Intergovernmental Working Group, the agreement itself must establish the framework for these measures, with industry involvement playing a crucial role. The current draft proposes that, in the event of a pandemic emergency, companies must allocate at least 20% of their vaccine, diagnostic, and therapeutic production to the WHO—10% free of charge and 10% at market price.

Technology transfer is another highly debated issue. There is consensus that such transfers should be based on mutually agreed terms, but disagreement persists over whether these should be voluntary or legally binding. Developing countries argue that the discussion should not focus on if tech-

nology transfer happens, but rather how it is implemented through agreed terms. Meanwhile, Western countries and industry stakeholders maintain that voluntariness is a fundamental criterion.

The end of February also marked the 20th anniversary of the WHO Framework Convention on Tobacco Control (FCTC), the organization's first international health treaty. This treaty has significantly reduced tobacco consumption worldwide, proving that strong, legally binding health agreements can drive real change. Against this backdrop, the urgency of the ongoing pandemic agreement negotiations becomes even clearer.

Challenges and Political Dynamics

The United States has officially announced its withdrawal from the negotiations. While its exit from WHO will take effect in one year, it remains a formal member until then. Argentina is also considering "pausing" its WHO membership, adding further geopolitical uncertainty. The European Union and African states are pushing for a resolution by the WHA in May to prevent the agreement from collapsing.

Within the negotiations, different approaches are evident. Some countries aim to finalize the agreement swiftly as a strong political signal for multilateralism, while others see major substantive obstacles that still need to be addressed. Key disagreements persist, particularly regarding funding for pandemic emergencies, as well as mechanisms to ensure the equitable distribution of vaccines and medical supplies.

Optimism and Calls for Agreement

Despite these challenges, some delegations remain confident. Several representatives stressed that there is still enough time to finalize the agreement by May. "No treaty is negotiated within a 9-to-6 setting—we are already working overtime and will continue to do so," one delegate stated. India's representative, Dr. Pradeep Khasnobis, reported progress, particularly on the more contentious articles. Eswatini, speaking on behalf of the African region, described the negotiations as "constructive" and emphasized that while the remain-

ing issues are critical, they are not insurmountable. Norway's Eirik Bakka stressed that the agreement is not an "empty framework" and already includes key elements necessary to reach a final deal.

A significant portion of last week's negotiations was dedicated to Articles 4 and 12, covering pandemic prevention, surveillance, and pathogen access and benefit-sharing (PABS). While progress has been made, negotiations continue at a slow pace. Without clear and enforceable rules, the risk remains that past inequities in access to diagnostics, therapeutics, and vaccines could be repeated. Discussions on surveillance, prevention, and One Health have been difficult, and the question of whether technology transfer should be voluntary or legally binding remains unresolved.

Appeals and Outlook

WHO Director-General Dr. Tedros Adhanom Ghebreyesus made an urgent appeal to member states: "It is now or never. The world needs this agreement to ensure preparedness for future pandemics." INB Co-Chair Precious Matsoso emphasized that the negotiating team will consolidate all outstanding issues into a final document to facilitate a more structured discussion. Tedros further underscored the need for pragmatic solutions and swift resolution of remaining issues to conclude the agreement on time.

With only five negotiation days left in April, whether a consensus can be reached remains uncertain. The outcome of the next meeting will determine whether the pandemic agreement makes history or fails. Despite the challenges, many delegations reaffirmed their commitment to completing the work before the WHA and intensifying intersessional discussions in the coming weeks. Negotiations are progressing—slowly, but with a shared goal of concluding a historic treaty.

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