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The shifting sands of global health security: pandemic accord and protectionism in a new political era

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The World Health Organization (WHO) Pandemic Accord, adopted in May 2025, is a major development in global health governance. Agreed in the aftermath of COVID-19, it sets out a renewed commitment to international cooperation on future health emergencies[1]. However, the accord's implementation faces considerable geopolitical headwinds, including the rise of protectionism, historical inequities, and persistent critiques of global health institutions. Its ultimate success will depend on navigating this complex landscape and translating its ambitious goals into tangible action.

The Pandemic Accord aims to create a more resilient and equitable global health architecture. Its core objectives include strengthening global capacities for pandemic prevention, detection, and response; ensuring fair access to countermeasures like vaccines and diagnostics; and reinforcing the WHO's coordinating role[2]. The agreement builds on lessons from past collaborations, such as the International Health Regulations (IHR) and the COVID-19 Vaccine Global Access (COVAX) facility, seeking to formalize and strengthen mechanisms for collective security[1]

Several contentious negotiating points have now been written into the accord as binding commitments. These include the establishment of a Pathogen Access and Benefit-Sharing (PABS) system, designed to ensure that the sharing of pathogens and genetic sequence data leads to equitable benefits, including access to the resulting health products[2, 3]. This mechanism, however, remains contentious, touching upon sensitive issues of national sovereignty, data transparency, and commercial interests that complicated negotiations[3]. Other pillars of the agreement include provisions for technology transfer to diversify manufacturing of pandemic supplies and the creation of sustainable financing mechanisms to support preparedness globally[1,2].

Despite its adoption, the accord's foundation is challenged by a fragmented political environment. A significant challenge stems from the United States, which initiated its withdrawal from the WHO in January 2025 and ceased engagement with the accord's development[4]. While the formal withdrawal process requires a one-year notice, the disengagement of the WHO's largest historical funder creates a significant financial and leadership vacuum[5]. This move risks undermining the WHO's coordinating function and could encourage other nations to pursue protectionist policies.

Opposition is not uniform, and the negotiations exposed differing priorities among key blocs. Many low- and middle-income countries, especially within the African Union and BRICS, raised strong concerns about intellectual property and the practicalities of ensuring fair access, reflecting deep mistrust after the COVID-19 pandemic[3]. Furthermore, critiques of the WHO itself, including concerns about its governance structure and response effectiveness during past crises, have fueled hesitancy among some member states and must be addressed to build broad-based trust in the new framework[6].

Implementing the Pandemic Accord will take more than high-level political promises. It demands a

deeper engagement with its ethical dimensions and a willingness to reform global health governance. The principle of equity, particularly in access to vaccines and other technologies, is paramount[3]. This extends to biosecurity and the governance of digital health surveillance, which must be implemented with robust ethical oversight to protect individual rights while safeguarding public health.

The changing geopolitical landscape, while challenging, may also create opportunities for a more multipolar and equitable global health structure. Regional bodies such as the African CDC are poised to play a greater leadership role, strengthening preparedness at a local level and fostering more distributed global health leadership[6].

To ensure the accord's durability, member states should move beyond broad commitments to establish specific, practical reforms. This could include creating independent panels to monitor compliance and accountability, ensuring that all parties adhere to their obligations. Moreover, developing innovative pooled financing models can help diversify funding sources and reduce reliance on a small number of donors, making the system more resilient to political shifts[6].

The Pandemic Accord is intended to strengthen collective global health security. Its adoption affirms the indispensable role of multilateralism in an interconnected world where pathogens know no borders[7]. However, its promise is not guaranteed. Overcoming the challenges of political nationalism and addressing the legitimate critiques of past failures requires unwavering commitment from remaining member states. Success will be measured not by the signing of the agreement, but by the concerted, practical, and equitable implementation of its core principles to build a safer future for all.

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