# ABS Webinar: 'Special Considerations/Emergencies'



Professor Daniel Robinson (UNSW)
Pacific Regional Coordinator
ABS Capacity Development Initiative

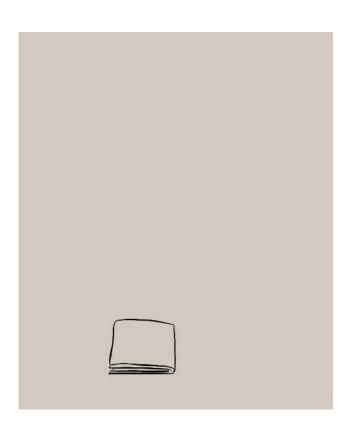




# Article 8 Nagoya Protocol

- Article 8 focuses on 'Special Considerations' including emergencies for public health, animal health, plant health, food security, and the environment.
- It emphasises having the need for 'expeditious access to genetic resources' including expeditious access and benefit-sharing procedures, particularly in regards to 'present or imminent emergencies'.
- Such ABS agreements could include reciprocity: we share a pathogen/genetic resource, you share affordable vaccines or treatments in return.
- This may require 'extraordinary meetings' of your ABS competent national authority (CNA) and biodiversity/research permitting committees for rapid approvals.
- May apply to COVID, but also in other emergencies where fast research is required and/or the situation is serious.
- Good idea to have a 'standard/model agreement' ready for such circumstances.







### Example from Europe:

- On 1st of June 2020 the European Virus Archive Global (EVA Global) research consortium already had made available 833 COVID-19 related products to 88 countries and continues to use science to support coronavirus detection, research, and development in an on-going way throughout the pandemic.
- Much of this appears to have been virus cell sharing, data sharing, genome digital sequence sharing etc.
- Likely that items are shared through a standard benefit-sharing agreement.
- https://www.european-virus-archive.com/evag-news/access-a nd-benefit-sharing-under-convention-biological-diversity-andnagova-protocol





# Influenza (PIP) example:

- The WHO (2011) Pandemic Influenza Preparedness Framework (PIP) acts as a kind of access and benefit sharing mechanism
- Under the PIP Framework regime, companies, universities, and others may still access materials (under SMTA) from the WHO Global Influenza Surveillance and Response System, but many must contribute toward its maintenance and companies especially must promise to provide access to vaccines, medicines, or intellectual property should a pandemic emerge.
- Since 2011, WHO has secured access to over 350 million doses of pandemic influenza vaccines and has received more than US\$ 100 million from manufacturers that is being used to strengthen pandemic preparedness and response capacities in countries where they are weak.
- Discussion ongoing about whether the PIP can be considered a 'Specialized International ABS Agreement' under Nagoya Protocol 4.4.



#### Further information:



- African ABS Webinars:
   <u>http://www.abs-initiative.info/abs-simply-explained/webinars/webinar-series-1-mapping-and-fostering-the-implementation-of-the-nagova-protocol-in-africa/</u>
- WHO PIP framework:
- https://www.who.int/influenza/pip/en/
- And Nagoya:
   <a href="http://158.232.12.119/influenza/pip/2016-review/NagoyaStudyAdvanceCopy\_full.pdf">http://158.232.12.119/influenza/pip/2016-review/NagoyaStudyAdvanceCopy\_full.pdf</a>
- And Benefit-sharing SMTAs: <a href="https://www.who.int/influenza/pip/smta2/en/">https://www.who.int/influenza/pip/smta2/en/</a>

