

## ***Innovation and Technology Transfer for Global Health***

### ***'Bridging the Gap in Global Health Innovation – From Needs to Access'***

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Oxford***

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#### **SESSION SUMMARIES – PARTNERSHIPS IN PROMOTING INNOVATION AND MANAGING RISK (2)<sup>1</sup>**

*This part of the conference was broken down into two sessions so that the topic could be fully explored both through presentations on overall strategies and suggestions for best practice, and also through case studies on different initiatives and partnerships. Dr K Satyanarayana and Andrew Farlow addressed partnerships for the development of products and the challenges related to product development and, increasingly, access and delivery.*

##### ***MMV - Moving to Access: Dr. Chris Hentschel, Medicines for Malaria Venture***

The Medicines for Malaria Venture (MMV) is an unusual product development partnership (PDP) as it works across discovery, development and delivery, in all areas of the product development process. It conducts R&D, collects and analyses drug information, builds awareness, and generates political and financial support. MMV's attention is turning towards ensuring access to the products it develops and is increasingly becoming involved in Phase Three trials (which is the market feedback phase), registration, delivery and what is termed in the private sector 'commercialisation'.

##### ***IPM Case Study: Dr. Zeda Rosenberg, International Partnership for Microbicides (IPM)***

The International Partnership for Microbicides (IPM) works to accelerate the development and availability of anti-HIV microbicial products, for use by women in developing countries. IPM acts as a "bridge" between companies in selecting and developing anti-HIV prevention products in the form of microbicides. IPM has developed innovative agreements with industry, through non-exclusive, royalty free licenses or material transfer agreements (MTA's) to explore topical bio availability and ultimately to develop, manufacture and distribute antiviral compounds as microbicides. Another essential component of IPM's work is in delivery and capacity building, such as community preparedness to ensure participation in clinical trials.

##### ***The Evolution of PDPs: Best Practices: Dr Adrian Towse, Office for Health Economics***

PDPs should increase efficiency in product development as managers of a diverse portfolio and as organizations which are well placed to utilise the comparative advantages of many different partners. However although this makes PDPs a rewarding investment for donors, there are several factors that donors may want to understand over best practice for PDPs. A recent study by FSG Social Impact

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<sup>1</sup> Prepared by Rachele Harris and Sarah Miller. Please address any comments or queries regarding this session summary to [andrew.farlow@economics.ox.ac.uk](mailto:andrew.farlow@economics.ox.ac.uk).

Advisors aims to support performance evaluation (based on a range of performance metrics) through the creation of useful metrics and indicators.

***Desa Siaga – A Strategy for Health Investment: Siti Sundari, Ministry of Health, Indonesia***

An Indonesian Ministry of Health village-level initiative, Desa Siaga, addresses access from a health systems perspective, particularly health development activities implemented at the grassroots level. The initiative is dependent on political will ((local government provides the majority of the financial support) and stakeholder participation, such as the involvement of the private sector through corporate social responsibility programmes. However, active community participation is the key to this initiative.

***Universities-Private Sector Relationships in Developing Countries: Dr. Jose Miguel Flores, Flores & Asociados, Universidad de Concepción***

Chilean innovation has been hindered by a lack of adequate R&D investment both from the public and private sectors. Universities have been reluctant to set up internal technology transfer facilities due to perceptions of high costs of investment as well as lack of experience among staff. Access to government funding for R&D is hampered by high levels of bureaucracy. Although government has a critical role in supporting innovation and technology transfer it is important for private-sector research spending to be increased, to enable universities to shift from reliance on government funds to partnership with the private sector.

***From Recruitment to Implementation of Contemporary Research in Traditional Environments: Ms. Paulette Baukol, Mayo Clinic***

The Mayo Clinic focuses on improving access to cancer treatment for under-served North American Indian communities. Its recruitment, retention and delivery processes involved in the HPV vaccine highlight that working with communities is key to advancing access. Community-based participatory research (CBPR) is a “collaborative approach to research that equitably involves all partners in the research process and recognises unique strengths that each brings”. CBPR begins with a research topic of importance to the community and has the aim of combining knowledge with action in achieving social change to improve health outcomes and eliminate health disparities. It can be adapted for other culturally sensitive communities and has worked successfully for almost ten years, establishing trusting relationships and participation.

## ***Discussion***

Partnerships are very important in promoting innovation and managing risk. They work best when the partners are diverse, when they represent a range of disciplines, when they operate on mutual trust, when they work towards a common goal, and when they include innovators, producers and end users in the partnerships.

PDPs face tension between rapid development and delivery of products to improve health of the poorest populations; and strengthening and building capacity in developing countries to engage in the product development process. PDPs engagement in different activities along the R&D, delivery, advocacy and capacity building spectrums need to be measured differently.

There is a need to start thinking about access as early as possible and to consider it as a process in the same way that R&D is a process. Access can improve if demand and supply gaps are reduced through community led surveillance, planning and financing and cultural integration tools. It is necessary to consider the different parts of this process, from conceptualising a suitable product profile to managing IP arrangements that enable flexible pricing and manufacturing strategies and through building on technical and policy experiences and lessons learnt from all partnerships.

Patents can be a misleading measure of innovation as they rarely translate into products and are costly to file and maintain, so caution should be exercised when deciding whether or not to patent. PDPs often use IP to ensure they are not blocked out of a technological field and to strengthen their negotiating power with firms.