WHA Policy Scrum Series: Research & Development (R&D), Sustainable Development Goals (SGDs), and Universal Health Coverage (UHC)

WEDNESDAY, APRIL 22, 2015
11:00 AM EST
Welcome & Introductions

LIZ KOHLWAY, GLOBAL HEALTH COUNCIL
Global Health Council
The Collective Voice of the Global Health Community

World Health Assembly (WHA) Policy Scrums

Webinars every other Wednesday @ 11:00 AM ET
Starting March 11, 2015 and leading up to the WHA (May 18 - 24)
Invitations to Follow

Topics Include:
- Health Workforce & Infectious Diseases
- Nutrition & Non-communicable Diseases (NCDs)
- Reproductive, Newborn, Child, and Adolescent Health (RMNCAH)
- Sustainable Development Goals (SDGs) & Universal Health Coverage (UHC)
- WHO Reform & Non-state Actors

The Policy Scrums Will:
- Provide a space for the GHC community to share priorities and concerns around WHA policy issues
- Highlight and offer context to issues that will be discussed at WHA
- Help inform future GHC positions and statements

GHC’s delegation to WHA is open to its members. To learn more e-mail: delegations@globalhealth.org.

If your organization is hosting a side-event, please share that information with us so that we can add it to GHC’s Master WHA Calendar!
R&D/Innovation at the 68th WHA

ASHLEY BENNETT
POLICY OFFICER
GLOBAL HEALTH TECHNOLOGIES COALITION
Global health R&D at the World Health Assembly

Ashley Bennett, Policy Officer
Global Health Technologies Coalition
Why do we consider R&D and innovation separately?

• As we see success in areas of global health, innovation and research are sometimes set on the political back burner.

• R&D for new global health technologies is a neglected space. Policymakers assume incorrectly that the for-profit sector will engage in research for neglected diseases without incentives or risk-mitigating partnerships.

• Non-profit product developers for global health challenges face unique scientific, regulatory, and policy obstacles, which cross-cut both high and low burden disease areas, as well as several health areas that span the globe but are particularly difficult to combat in low-resource or neglected settings.
<table>
<thead>
<tr>
<th>Without R&amp;D, we would not have...</th>
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<tbody>
<tr>
<td>Malaria bed nets or IRS</td>
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<td>ARVs for HIV/AIDS</td>
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<td>Diagnostic tools for TB</td>
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<td>Meningitis A vaccine</td>
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<td>Cold-chain technology for immunizations</td>
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<td>HIV PrEP</td>
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<td>Any NTD drugs</td>
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<table>
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<tr>
<th>Without R&amp;D, we will never have...</th>
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<tr>
<td>Vaccines for TB, HIV, and malaria</td>
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<tr>
<td>Single-dose cures for malaria and TB</td>
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<tr>
<td>Non-toxic NTD treatments</td>
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<tr>
<td>Diagnostic tools that don’t require a lab or a lab tech</td>
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A recent history of R&D at the World Health Assembly

2008
Expert working group on R&D

2010
Consultative Expert Working Group (CEWG) on Research and Development: financing & coordination

2012
CEWG releases report calling for treaty and observatory

2013
WHA approves demo projects. Observatory launches.

2014
Demo projects begin. Consideration of treaty postponed to 2016.

Global strategy and plan of action on public health, innovation and intellectual property

Special Programme for Research and Training in Tropical Diseases (TDR)
R&D and innovation at the 68th World Health Assembly

14. Promoting health through the life course
   14.1 Monitoring the achievement of the health-related MDGs
   14.2 Health in the post-2015 development agenda

15. Preparedness, surveillance and response
   15.1 Antimicrobial resistance

16. Communicable diseases
   16.1 2014 Ebola virus disease outbreak and follow-up
   16.2 Malaria: draft global technical strategy: post 2015

17. Health systems
   17.4 Follow-up of the report of the Consultative Expert Working Group on Research and Development: Financing and Coordination
   17.5 Global strategy and plan of action on public health, innovation and intellectual property
Figure. Proposed governance structure of the voluntary pooled fund
GHTC at WHA

- Webinar on global health R&D and establishing access to new technologies Monday May 18th
- Proposed statement through the Global Health Council
- A jumping off point for WHA69

What GHC members can do

- Attend the webinar!
- Ensure that R&D is included in conversations around implementation of plans or resolutions that don’t currently contain R&D provisions, such as the GVAP
- Promote the inclusion of health innovation indicators in the Post-2015 SDGs (report coming out in July)
Looking ahead: 69th WHA in 2016

- Pooled funding mechanism may be finalized and established
- R&D treaty back on the table
- Indicators for appropriate health R&D projects will be approved and put in place
- Global regulatory policy will be on the agenda
- The post-2015 SDGs will be in place, with approved indicators for monitoring
Thank you!

abennett@path.org
SDGs & UHC
at the 68th WHA

MARIELLE HART
POLICY MANAGER
INTERNATIONAL HIV/AIDS ALLIANCE
GHC WHA Policy Scrum: Post-2015 health and UHC

Marielle Hart
Policy Manager
International HIV/AIDS Alliance
68th WHA: a crucial time to discuss post-2015 health

- Adoption post-2015 Development Framework
  September 2015
- Ongoing negotiations on SDG targets, indicators
- UHC indicators
- Global health measurement roadmap and Summit: June 205
Where are we?

Post-2015 health targets and indicators: where are we now?

• 17 goals, 169 targets, one health goal, 9 (+4) targets, aim to develop 100-120 indicators, i.e. less than 1 indicator per target
• Current targets goal 3:

1. Reduce maternal mortality
2. End preventable newborn and under-5 mortality
3. End epidemics HIV, TB, malaria, NTD, comm. diseases; combat hepatitis, waterborne diseases, other communicable diseases
4. Reduce mortality due to NCD and promote mental health
5. Substance abuse and alcohol harmful use
6. Reduce road traffic injury deaths
7. Sexual and reproductive health care
8. Universal health coverage
9. Reduce death from environmental pollution
+ additional Targets a, b, c and d
Main points of consensus

• Architecture for an integrated monitoring framework
• Small number of global indicators
• Final proposal adopted by Statistical Commission in 2016
• National ownership and selection of additional indicators
• Ensure disaggregation of indicators and include a human rights dimension (no one left behind principle)
• Strengthening national statistical capacity
• Draw from existing integrated statistical frameworks and build on MDG experience
• Proposed UHC target: Achieve UHC, including financial risk protection, access to quality essential health care services, and access to safe, effective quality, and affordable medicines and vaccines for all.

• Proposed indicator is solely focused on financial risk protection and impoverishing health expenses. No coverage indicator in the current indicator proposal. Unfortunately, no coverage indicators under the other health-related targets either. Mainly incidence and mortality indicators.

• WHO approach to UHC: all populations, independent of household income, place or residence or sex, have at a minimum 80% essential health services coverage without incurring financial hardship. Financial protection and coverage of interventions, with equity are the main indicators in the global framework that many countries use. The actual coverage indicators tracked for monitoring are determined by countries as there are differences in needs, health systems and levels of socioeconomic development.

• So the UHC target could provide an umbrella for these interventions alongside financial risk protection indicators (Tracer interventions: family planning, antenatal care, skilled birth attendance, coverage emergency obstetric care, child immunization, NTD preventive therapy, ARV therapy, TB treatment, tobacco, air pollution, substance abuse treatment, harmful use of alcohol)
Benefits of coverage indicators under UHC

• Reducing the numbers: The likelihood of further reductions in the numbers of indicators will mean that there is no space for additional indicators beyond mortality and incidence indicators under the other targets.

• In UHC all coverage indicators are presented as a single indicator. This allows indicators like immunization coverage ART, TB treatment etc. to be included without adding to the number of indicators.

• Integration: It provides a frame for an integrated approach in health, rather than siloes along the lines of the health targets.

• Equity: It provides an opportunity to mainstream equity monitoring, as UHC is equity-based (concern about other marginalized groups however).

• Country-specificity: It provides an entry point for country specificity in the indicators. It however does not preclude global monitoring, as there are a small set of tracer indicators that all countries are likely to monitor, or are already monitoring. Several of these indicators are prominent in the health targets, such as family planning, skilled birth attendance and tobacco use (again concern about marginalized and excluded groups).
Next steps

- Monitoring the ongoing indicator discussions in the post-2015 negotiations.
- Online stakeholder feedback/consultation on the draft indicator framework: deadline April 26th.
- [https://docs.google.com/forms/d/1gFAkPh2C-3XS1_xXZIG9b56WDvAQYuczSC5LEQ9faA/viewform?c=0&w=1](https://docs.google.com/forms/d/1gFAkPh2C-3XS1_xXZIG9b56WDvAQYuczSC5LEQ9faA/viewform?c=0&w=1)
- GHC and AfGH side event at the WHA on post-2015 health indicators, measurement and accountability.
- Possibly CSO statement at WHA?
- Health Measurement Summit in DC in June led by WHO, World Bank and USAID and adoption health measurement road map: strengthening country systems that improve accountability and track and monitor progress.
- Support country-level advocacy on indicators. Additionally, the WHO, World Bank, and USAID are planning to consult with a number of countries after June 2015 on the implementation of the roadmap and UHC targets. These countries include: Bangladesh, Senegal, India, Kenya, Nigeria, Peru, Indonesia, and South Africa.
- (GHC contribution to stakeholder consultation on draft road map)
Next Steps: Toward WHA 2015
GHC at WHA


GHC Delegation: E-mail ekohlway@globalhealth.org

Communications about access to the official meeting, hotel room blocks, WHA policy scrums, side events, & more

Save the Date: GHC welcome reception at Hotel Royal on **May 17 from 5:00 PM – 7:00 PM.**

WHA Calendar: If your organization is hosting a side event at WHA, let us know. GHC is creating a Master Calendar of WHA Side Events, available online: [http://globalhealth.org/events/category/68th-wha-calendar](http://globalhealth.org/events/category/68th-wha-calendar).
Thank You for Attending!

Next WHA Policy Scrum
Wednesday, May 6 @ 11:00 AM
WHO Reform & Non-State Actors