



MSF Statement on agenda item 3. Matters arising out of resolutions and decisions of the World Health Assembly: Consultative Expert Working Group: Research and Development Intervention by Katy Athersuch, Médecins Sans Frontières International

Médecins Sans Frontières welcomes the report of the CEWG that has built on a decade's work at WHO on the need to address the problems of medical innovation for developing countries. That R&D fails to deliver for the developing world is a problem MSF cannot ignore. All too often, the diagnostic tools, medicines or vaccines we need on a daily basis are unsuitable, unaffordable or simply unavailable.

Unmet needs include, but are not limited to: more effective treatments for drug-resistant tuberculosis; new antibiotics to treat life-threatening infections in the face of increasing resistance; new treatments and diagnostics for kala azar and sleeping sickness; and vaccines that do not need to be refrigerated or can be given without an injection.

Undoubtedly, there has been progress in the last 10 years, with a few new products launched and promising ones under development by public/private partnerships or PDPs. But progress is fragile and ad hoc, financing is not secure, R&D priorities are not clear, and there is an overdependence on donor philanthropy and corporate social responsibility. We need a more sustainable solution, which is driven by member states themselves.

The report made a number of recommendations on several new mechanisms to stimulate research and development (R&D) towards the health needs of developing countries, including establishing an Observatory to better monitor and coordinate R&D efforts. These initiatives should be supported but this cannot be all that is done. For example, an observatory alone would simply record the chronic under investment in R&D to meet developing country health needs. It would not redress this fatal imbalance.

The report's central conclusion is that in order for these mechanisms to be successful and for sustainable and significant progress to be made, there is a need for an overarching framework: a binding convention to ensure that priorities are set, funding is secured and the outcomes of R&D are in fact accessible, affordable and available in developing countries.

Change is possible. The CEWG report rightly concludes that multilateral action is needed. Member States from this region have an opportunity to take the decisive step towards negotiating a convention that will establish an adequate political framework to secure medical innovation for neglected populations. Countries do not have to reach consensus on all the issues under discussion to start negotiations. But negotiations need to start because consensus exists on the problem and the solution needs to be a political one.

By focusing on **objectives, principles, scope and functions of the R&D convention** at a regional level, EURO countries will be well placed to feed into the global discussions to be held later this year. In parallel to this, projects to implement the recommended R&D mechanisms should be taken forward in the short to medium term to address the urgency of the situation.

We need collective action and leadership from WHO and from Member States.