

Annual  
Report  
**hai**

Health Action International



2009

# HAI Global Network

The day-to-day administration and coordination of the HAI global network is assigned to a secretariat, HAI Global, which also houses content orientated work of a global nature. The four regional offices carry out projects and advocacy related to regional priorities for medicines' policy.



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# Goal, Vision and Mission



**Health Action International (HAI) is an independent, global network working to increase access to essential medicines and improve their rational use.**



## Goal

Health Action International (HAI) is working towards a world where all people, especially those who are poor or marginalised, are able to exercise their human right to health. Our goal is to achieve universal and equitable access to affordable essential medicines of assured quality and to ensure that those medicines are used rationally to promote the highest standards of health throughout the world.



## Vision

HAI and its partners recognise that poverty and social injustice represent the greatest barriers to sustainable health and development. Together, we work for just and equitable societies where people can participate in making the decisions that affect their health and well being. It is only by achieving sustainable levels of good health that citizens can take a full and active part in development.

## Mission

HAI supports rational and economic medicines' policy and advocates for social justice in health care by improving access to essential medicines and promoting the rational use of medicines.

# HAI Global Programme



## 1 Access to Essential Medicines



Increased Access to Essential Medicines by ensuring that they are available at affordable prices when treatment is needed, especially for the poor



## 2 Rational Use of Medicines

Promotion of the Rational Use of Medicines concept: that all medicines marketed should meet real medical needs, have therapeutic advantages, be acceptably safe and offer value for money and be used rationally



## 3 Democratisation of Medicines' Policy

Greater Democracy and Transparency in all aspects of decision making around pharmaceutical policy by supporting the equal participation of patients and consumers in policy decisions

# Governance



**Global Board**  
Stichting Health Action International  
Amsterdam, Netherlands

**HAI Global**  
(Including Secretariat)  
Amsterdam, Netherlands

**HAI Africa**  
Regional Office  
Nairobi, Kenya

**HAI Asia Pacific**  
Regional Office  
Colombo, Sri Lanka

**HAI Europe**  
Regional Office  
Amsterdam, Netherlands

**HAI Latin America**  
Regional Office  
Lima, Perú

**Members' Board**  
HAI Africa  
Nairobi, Kenya

**Members' Board**  
HAI Asia Pacific  
Colombo, Sri Lanka

**Members' Board**  
HAI Europe  
Amsterdam, Netherlands

**Members' Board**  
HAI Latin America  
Lima, Perú

# Letter from the Chairman of the Board

For nearly thirty years, HAI has researched, analysed and advocated for medicines policy interventions that affect the health of the poorest people in the world. HAI's presence and interventions in domestic, regional and international fora have pressed decision makers to become ever more attuned to the crucial role that access to essential medicines plays in the attainment of health, human rights, the millennium development goals.



HAI's work aims to entrench a public health perspective in policy decision making that reflects the voice of the very people who are affected by global trade and health conflicts of interest - patients and consumers. For their ceaseless commitment and productivity over this year, I am indebted to HAI's dedicated staff and global membership, who have delivered so much more than is apparent from a work plan or report.


2009 was the penultimate year of HAI's Global Programme supported through MFS I and we are grateful for the ongoing support and insight facilitated by our strategic partnership with the Dutch Ministry of Foreign Affairs. Policy interventions take many months, or even years, to impact on grass roots target groups and we must not lose sight of the fact that this work will need constant and consistent endeavour to maintain momentum. This is especially true against the backdrop of the global financial crisis, which demands innovative thinking and working practices not only from civil society organisations, such as HAI, but also from the originator and generic pharmaceutical industries, governments, health insurance companies and healthcare professionals, all of whom must reiterate through action, their commitment to health equity and the role that it plays in sustainable development.

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# Access to Essential Medicines




In 2009, HAI regional offices mounted several successful campaigns at the national, regional and global level to ensure that Access to Essential Medicines is treated as a policy priority.



In HAI Africa, the 'Stop Stock-outs' (SSO) campaign was based on data from monitoring surveys that HAI Africa supported in Kenya, Uganda and Tanzania. Stock-outs of medicines can have serious consequences for patients, sometimes forcing them to travel to health facilities that may be further away or more expensive; or to go without the medicines they need altogether. Thanks to the work of the partner organisations, and HAI Africa as the regional partner, the SSO campaign grew considerably in 2009 and now hosts a dedicated website with news and resources. HAI Africa also continued to conduct surveys of medicines prices, availability, and affordability with World Health Organization (WHO) and Ministries of Health, using the gold-standard WHO/HAI methodology.



The joint WHO/HAI Project on Medicines Prices and Availability built on the success of its methodology and the release of the Second Edition of the Manual by carrying out evidence-based awareness-raising campaigns, such as the Pill Price Check. In November of 2009, individuals from HAI's extended network collected the price a patient would have to pay for a broad spectrum antibacterial (ciprofloxacin 500mg tablets/capsules) in their nearest private retail pharmacy. HAI Global produced an interactive online map to present and compare the prices that were collected.



HAI Asia-Pacific continued to share its technical expertise with academics and policymakers in the region, presenting original research on Medicine Price Control Mechanisms at the Pharmaceutical Society of Sri

# Access to Essential Medicines

Lanka, Technical Sessions 2009. HAI Asia-Pacific was also represented at the United Nations Economic and Social Council (ECOSOC) Annual Ministerial meeting of financing strategies for health care, ensuring that HAI's expertise reached those responsible for influencing and implementing policies that affect access to medicines in the region.

In 2009, HAI Europe expanded its work on European Union (EU) trade agreements and access to medicines in developing countries. In response to events early in the year, including the European seizures of generic medicines in transit, and the negotiations toward an 'Anti-counterfeiting Trade Agreement, HAI Europe widened its scrutiny to include broader EU trade policy in international fora. Our 'Freedom of Information' request to the Dutch government on the seizures provided publicly accessible data on the scale of the issue, and HAI Europe's existing knowledge of border measures and access to medicines issues enabled it to provide expertise to the Dutch and Indian governments.

The HAI Latin America (AIS LAC) regional office also continued to work on the issue of trade and Access to Medicines. The office contributed to research that forecast the impact on medicines prices and accessibility in Colombia and Ecuador from the EU's intellectual property (IP) proposals in the trade agreement. The resulting impact studies were published and widely reported in Latin America and Europe. AIS LAC also carried out national studies to explore the cost of cancer treatment and anti-retrovirals, which for the first time generated public data on the prices and costs of treatment for these diseases.





# Rational Use of Medicines



As well as advocating for policies and regulations that support the Rational Use of Medicines (RUM), HAI's activities this year also offered practical assistance to health professionals and patients; providing independent information about medicines, and training on obstacles to RUM, such as the promotion of prescription medicines.



HAI Africa drafted a report on unethical practices of medicines promotion by the pharmaceutical industry in Kenya, Madagascar, Malawi, Uganda, Zambia and Zimbabwe, which was presented at the 62nd World Health Assembly, as part of HAI's technical briefing on promotion and rational use. At grass-roots level, HAI Africa produced and disseminated information kits to fill the gap of reliable and objective information on medicines for consumers and health workers.



HAI Asia Pacific organised a regional seminar in 2009 with fifty Educators from over 15 universities across the region including Australia, India, Indonesia, Malaysia, Nepal, Pakistan, Philippines, Sri Lanka, Thailand and Vietnam. The seminar discussed potential innovations in the pharmacy and medical undergraduate curricula aimed at promoting rational use in the region. One of the most significant outcomes from the seminar was the formation of Educators for Rational Drug Use (ERDU), an informal regional network of educators who use an online platform to exchange ideas for new curriculum activities.

The European Commission's legislative proposals on 'Information to patients' would allow pharmaceutical companies to communicate directly with patients about their products, which represents an unavoidable conflict between the commercial and the public interests. HAI Europe continued to raise awareness about

# Rational Use of Medicines

this issue among EU policymakers in 2009: publishing analyses, evidence of breaches of the existing EU ban on direct-to-consumer advertising, joint briefing papers with European civil society partners, and detailed policy recommendations to ensure that EU citizens have access to truly independent sources of information about the medicines they take. HAI Europe staff also provided technical expertise to European Council meetings and co-authored the chapter on Pharmaceutical Promotion and Independent Information, with another HAI member for the World Health Organization's *World Medicines Situation Report*.

AIS LAC was very active on the implementation of WHO resolution WHA60.16 on the Rational Use of Medicine (RUM): an AISLAC representative participated in a working group at the WHO Regional Office for the Americas (AMRO) to develop a regional strategy for RUM and a meeting was organised in Nicaragua with the Pan American Health Organization (PAHO), the United Nations Population Fund and AIS Nicaragua to discuss the Nicaraguan Ministry of Health proposal to be the first pilot country in the region to implement a national strategy for RUM. The office also worked on the Spanish translation of the WHO/HAI student manual *Understanding and responding to pharmaceutical promotion - A practical guide*.

HAI Global hosted a technical briefing on promotion and rational use at the 62<sup>nd</sup> World Health Assembly to discuss initiatives that have arisen from the RUM resolution. The WHO/HAI student manual, *Understanding and responding to pharmaceutical promotion - A practical guide*, which was published in English, Spanish and Russian, was presented during this meeting to country delegates from all over the world.



A vertical column of five decorative squares on the left side of the page. From top to bottom, they are: a grey square with a green border, a grey square with a teal border, a grey square with a blue border, a grey square with a dark blue border, and a grey square with a light green border.

# Democratisation of Medicines' Policy

HAI seeks to ensure that the voice of those affected by medicines policy informs policy decisions at all levels. In 2009, HAI Asia Pacific continued to play an active role in opposing attempts to privatise health by producing and disseminating information on the strategies and their detrimental effects on access to medicines to create greater public awareness of the trend. HAI Asia Pacific published a report on 'Perceptions towards Health Care Privatization in Malaysia: Preliminary Findings from A Cross Sectional Survey among Patients and Health Care Workers' and a report on the 'National Health System, Access to Medicines and Health Care in India'.

At an official NGO briefing during the 62nd World Health Assembly, HAI Africa presented the results of its five-country study on medicines promotion that was attended by a range of country delegations, health professionals, civil society organisations, medical and pharmacy students, academics as well as pharmaceutical industry representatives. The HAI Africa network also participated in a number of high-level policy meetings, such as the International Monetary Fund health financing meeting, the UNITAID Board meeting, WHO AFRO Regional Committee for Africa, and the African Union Conference of African Health Ministers.

HAI Europe took part in a range of policy advisory groups and consultations in 2009, including membership of the European Medicines Agency (EMA) Patient & Consumer Working Party, the Health Policy Forum, and the European Public Health Alliance, and network members carried out reviews of patient information on medicines for the EMA. HAI Europe was also part of the successful civil society campaign to move the pharmaceuticals portfolio from Directorate-General (DG) Enterprise to DG SANCO (Health and Consumer Affairs).

# Democratisation of Medicines' Policy

As part of the EU-Andean civil society alliance, HAI Europe organised an Expert Meeting on EU trade agreements and access to medicines at the European Parliament, co-hosted by Members of the European Parliament and its joint report on EU trade and access to medicines with Oxfam, was endorsed by 63 CSOs worldwide.

In 2009, HAI Global initiated a long-term project to produce a first-of-its-kind encyclopaedia of the politics of medicines: The Politics of Medicines Fact Book. The aim is to create a comprehensive, easy-to-use and accessible resource for a broad audience and to share this resource with HAI's growing network of consumers, health care providers, public interest NGOs and policy makers in order to effectively advocate for policy changes that improve health for all.

AISLAC represented and advanced the civil society voice in a number of ways, for example by participating in the National Health Council (Peru), and publishing the bulletin Correo de AIS. The AISLAC website was also rated among the 20 most visited sites on Access to medicines and Rational use of medicines and among the 10 most visited sites on medicine promotion according to Google International (Spanish).





# Member Spotlight



As a global network, HAI has an enormous depth and breadth of expertise that contributes towards ensuring that all people have access to safe, effective and affordable medicines that meet their real health needs. The following profiles showcase just some of the exceptional work that was carried out in 2008 by HAI members all over the world.



## DRUG ACTION FORUM-KARNATAKA



This year's spotlight is on HAI Asia-Pacific Member, Drug Action Forum - Karnataka (DAF-K). DAF-K has been associated with HAI Asia Pacific for almost five years.

DAF-K's objectives are:

To empower the consumer with special emphasis on policies of the government with regard to medicines and health and to promote the Essential Medicine concept, that fewer than 372 medicines are necessary to treat more than 90% of health problems requiring medicines.

- To promote the rational use of medicines that all medicines marketed should meet real medical needs, have therapeutic advantage, be acceptably safe and offer value for money.
- For better controls on drug promotion and the provision of balanced, independent information for prescribers and consumers.

- To campaign for Health for All, as human right objective.

DAF-K has been at the forefront of a campaign to persuade global pharmaceutical giant, Novartis, to drop their actions in the Indian courts, which could jeopardise public health in India and in any country that relies on Indian generic medicines. India's use of intellectual property flexibilities, as encouraged by international trade rules, is crucial in making India the 'drugstore of the developing world' and could serve as a model for other countries. But if Novartis succeeds, this window will close in India and possibly elsewhere. The campaign, launched in 2008 and continued into 2009, has helped spread awareness of the issue across the globe.

Another core activity in 2009 was drug pricing in the Indian context and DAF-K educated parliamentarians about the problems with the current drug pricing system. DAF-K helped also to create better public awareness about the soaring prices of essential drugs by conducting press conferences in Bangalore and Delhi (with the support of partner, AIDAN, in Delhi); organising public meetings; and publishing booklets, to pressure the government to improve the oversight of drug prices.

The rational use of vaccines was another key area of DAF-K's work in 2009. DAF-K strongly opposed the routine inclusion of vaccines as a part of the national public health programme by filing public interest litigations (PIL) challenging its public health utility. DAF-K also initiated a public interest litigation (PIL) suit in response to the government's closure of public vaccine manufacturing units.

<http://www.daf-k.cjb.net/>

<http://aidanindia.wordpress.com/>





## Netherlands Medicines & Development Partnership

Three Dutch civil society organisations, Health Action International (HAI), Wemos and Health[e]Foundation have pooled their expertise to enhance their crucial work in development, access, and rational use of essential medicines and the advocacy for needs-driven drug policies in low and middle income countries.

Known as the Netherlands Medicines and Development Partnership (NMDP), the group is enlisting the cooperation of academic institutions, health and development experts working in both the public and private sectors, and internationally renowned professionals. NMDP has adopted an integrated approach that targets the whole chain: from development through delivery to use of medicines.

The partnership provides multi-dimensional programme of interventions from complementary ethical, economic and political perspectives and engages in knowledge-transfer, civil society capacity building and evidence-based advocacy. In the Netherlands, as in the entire development world, civil society is

being challenged to reassess its role and its contribution to development, so NMDP aims to show that transparent cooperation between civil society partners with unique skills can bring about very real benefits to global public health.

Through its programme, NMDP will contribute to achieving Millennium Development Goals 1, 4, 5, 6 and 8, while focusing on universal access to medicines. The choice of strategies employed - capacity building and actions that influence policy - and the intended results are based on the development policy themes of sustainable economic development, HIV/AIDS, education, health care, the human right to health, democratisation of health policy and good governance.



### **Mission Statement**

**NMDP works to increase access to essential medicines by strengthening health care systems, capacity building and empowering people especially the poor and marginalised; by taking innovative actions that influence medicines policy; by promoting ethical research and development; by facilitating knowledge transfer; by helping to provide a stable and predictable supply of affordable medicines; and through education and capacity building focused on supply management and rational use of medicines.**

NMDP envisages a world in which:

- research and development of medicines is conducted ethically and focused on innovations that meet the health care needs of children and adults in developing countries, and the global intellectual property framework is used to benefit public health;
- there is a sustainable, efficient and reliable supply of safe and effective medicines, including medicines for the treatment of children, that are accessible, available and affordable for poor people in developing countries;
- all medicines are prescribed, distributed or sold in the appropriate manner, and patients use them correctly and during the appropriate period.

[www.nmdp.nl/](http://www.nmdp.nl/)



# The Global Board



**Catherine Hodgkin**

Director of Development Policy and Practice at the Royal Tropical Institute, Amsterdam with over 20 years experience in international public health.



**Eva Ombaka**

Coordinator of the Ecumenical Pharmaceutical Network (EPN) Eva is from Tanzania and was a founder member of HAI Africa.



**Gerrie Breukers**  
**(Treasurer)**

Regional Program Manager for Oxfam Novib in Kenya with 15 years experience of INGOs in West and Central Africa.



**Pascale Brudon**  
**(Secretary)**

Pascale is a founder member of HAI and worked in the WHO Drug Action Programme for 15 years and as the WHO Representative in Vietnam.



**Prem Chandran John**

Chair of the Global People's Health Movement and a physician in the public sector with long history of participation in the Asian Community Health Action Network and HAI.



**Harriet Birungi**

A Ugandan working in Kenya on reproductive health issues and sexuality. She has extensive experience of project steering, monitoring and evaluation in Africa.





# Financial Information



For financial year 2009, Health Action International received € 1.937.800 from donors to support the HAI Global Programme, which is a 36 percent increase on 2008. The increase is attributed to the continued strong support from our institutional donors, especially the Dutch Ministry of Development Cooperation. Programme expenses totalled €1.937.050, whilst the Global overhead expenses represent 6.8% (2008: 6.1%) of the total Programme expenses.











## Project Expenses by Geographic Region

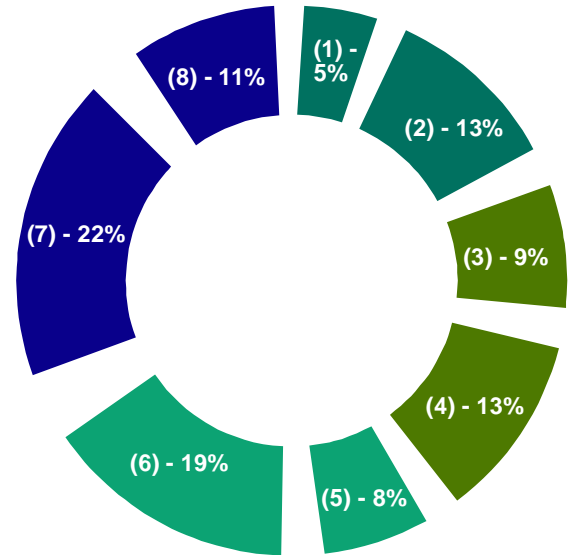


### Total programme expenses 2009

EUR 1.937.050 (2008: 1.486.300)

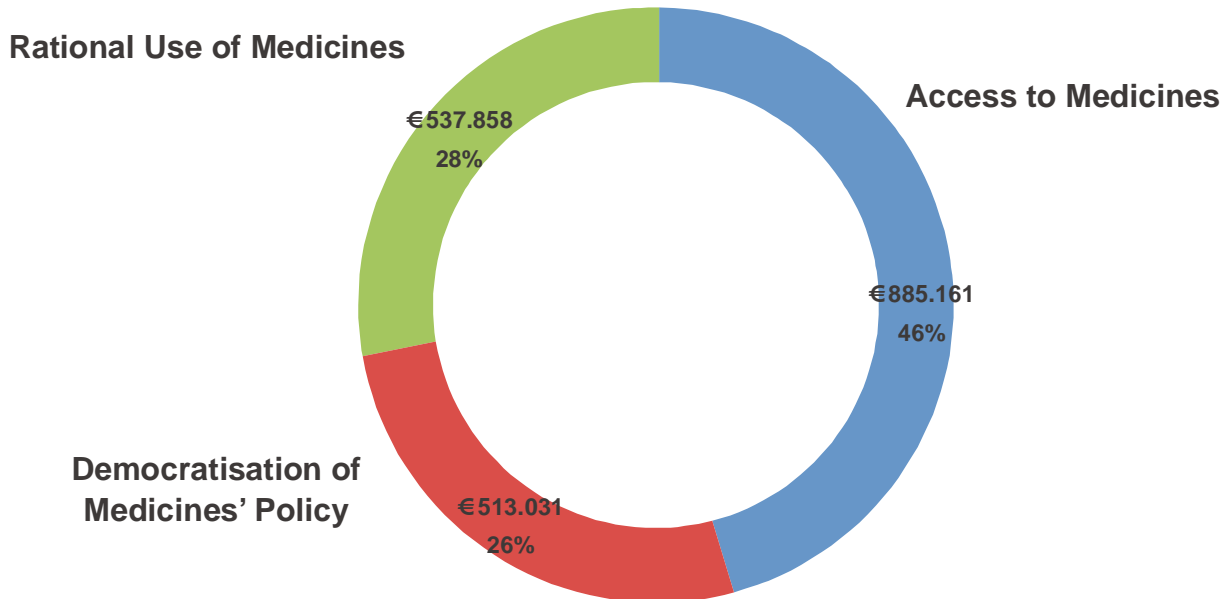


-  HAI Asia Pacific
-  HAI Global (AP)
-  HAI Africa
-  HAI Global (Africa)
-  HAI Latin America & Caribbean
-  HAI Global (LA)
-  HAI Europe
-  HAI Global (Europe)

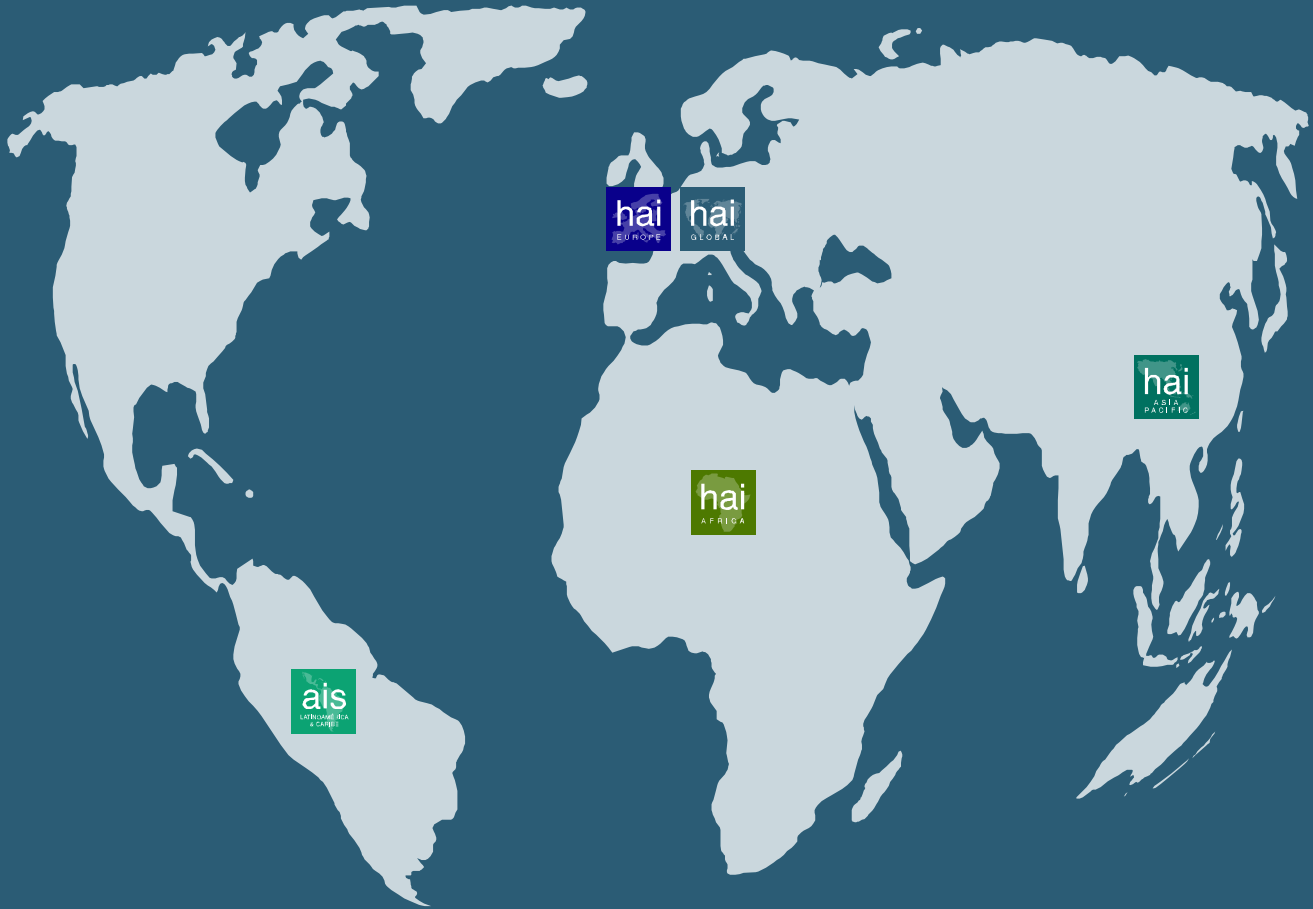


# Financial Information

## Project Expenses by Objective



For more detailed information, please see the HAI Financial Statement 2009 at [www.haiweb.org](http://www.haiweb.org)



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