



**WHA66 – Intervention agenda item 17.2: follow up of the CEWG report  
Stichting Health Action International, KEI and the Berne Declaration**

The Consultative Expert Working Group on Research and Development (CEWG) produced a report in April last year which expressed the urgent need to repair a broken R&D system with a comprehensive solution in the form of a global framework.

The draft resolution does not provide a clear agenda towards this and suffers from lack of ambition, lack of clarity, and lack of concrete commitments. It *does* contain valuable elements that can be used as stepping stones towards a R&D framework. We welcome the commitment to an R&D observatory and the demonstration projects.

However, we are concerned about the losing sight of the core principles and norms that should govern public health R&D. The CEWG report contained three key recommendations to ensure needs driven R&D and affordable access to medical products from the start of the innovation process. The first is the need to de-link the costs of R&D from the price of the end product. The second is to conduct R&D through open knowledge innovation - including open collaboration in the R&D process and generating knowledge as a public good. The third is to create new global norms to ensure sustainable financing of R&D for health care priorities.

Any project that comes out of this process to improve global health R&D should advance work on these norms and principles. Otherwise, the post CEWG process risks being reduced to a weak coordination mechanism that puts little money into an existing system that is broken. The demonstration projects be used to operationalize the concrete push and pull mechanisms that according to the CEWG best incorporate these principles of de-linkage and knowledge sharing.

As regards the R&D observatory, it should identify and provide guidance on the priority areas of needs-driven R&D, and to the extent possible and appropriate, data needs to be publicly accessible. The observatory should collect economic, legal, scientific and health impact data on R&D spending by both state and non-state actors. It could be more ambitious and also collect actual research data. To start, any data, compound or technology resulting from the demonstration projects could then be included in the open databases managed by the observatory.

These proposed actions, even when seen in an optimistic light, should be seen as stepping stones towards a comprehensive solution addressing a broad range of diseases and conditions.

We call upon Member States to begin discussions on a framework for coordination, norm setting and financing for R&D by 2014. Given the widespread recognition of the urgency of this problem, we cannot afford to postpone this to 2016.

On the US proposal, we should avoid repeating the mistakes of the first Expert Working Group. Any advisory group on this process should be either consultative with governments or inter-governmental. When other stakeholders are involved this should concern a variety of stakeholders, including civil society.