Led and coordinated by UNDP, the Access and Delivery Partnership (ADP) focuses on providing low- and middle-income countries (LMICs) with technical skills and expertise to develop the systems and processes required to effectively promote access to and delivery of new health technologies for tuberculosis (TB), malaria and neglected tropical diseases (NTDs).

The ADP is supported by the Government of Japan.
Tuberculosis (TB) is one of the world’s deadliest communicable diseases. In 2014, an estimated 9.6 million people developed active TB, and 1.5 million died from the disease. An estimated 3.3 billion people around the world were estimated to be at risk of malaria in 2014, with a total of 214 million cases and 438,000 deaths, with most occurring among children under five years of age.

Neglected tropical diseases (NTDs) affect 1.7 billion people in 186 countries, accounting for one of the highest burdens among all infective and parasitic diseases.

**Current challenges**

- Despite their significant human and sustainable development impact, relatively few new health technologies are available for TB, malaria and NTDs. Many current treatments and diagnostic tests for these diseases are outdated and ineffective.
- Innovation is essential, but not sufficient for health systems to deliver new health technologies to the communities and populations that need them most.
- With few new medicines approved for TB, malaria and NTDs, addressing the factors that impede effective access and delivery of health technologies is all the more crucial.
- In many low- and middle-income countries (LMICs), the delivery of accessible, affordable and optimal health technologies remains a major problem, which represents a significant barrier to achieving universal health coverage (UHC).
- In many settings, health systems are able to reach only certain segments of the population, leaving others behind.

**Promoting innovation, access and delivery of new health technologies**

The Government of Japan established and supports two complementary projects that are implemented through an ongoing collaboration with the United Nations Development Programme (UNDP):

- **The Global Health Innovative Technology (GHIT) Fund** is a new model for global health research and development (R&D) financing that aims to stimulate innovation and research through the development of new medicines, diagnostic tests and vaccines for TB, malaria and NTDs.
- **The Access and Delivery Partnership (ADP)** amplifies the influence of the GHIT Fund and other product development partnerships (PDPs) by assisting LMICs to enhance relevant capacities for the introduction and scale up of new health technologies through six strategic, inter-related ‘pathways’.

Through the visionary strategy of catalysing R&D for new health technologies through the GHIT Fund, while at the same time helping to safeguard their sustainable access and equitable delivery in LMICs through the ADP, the Government of Japan successfully brings together what have historically been two parallel elements of the global health response.

**The ADP’s intersectoral pathways**

The ADP approach enhances country capacities for evidence-based decision-making across multiple sectors, in support of improved access and delivery of health technologies. As a result, this boosts sustainability and resilience within multiple national policy and programme mechanisms and institutions, as well as inspiring improved domestic investment in critical health priorities. The partnership also emphasizes the uniqueness of respective national and subnational contexts, stressing the distinct priorities for health systems to promote access and delivery in each setting.

Acknowledging that multiple disciplines within the health system are critical for achieving access to, and delivery of, health technologies, the ADP approach aims to support countries to integrate these major work areas through the following series of focused ‘pathways’. An enabling policy and legal framework across multiple sectors is a pre-condition for an effectively functioning health system. Implementation research (IR) capacity supplements policy-making by systematically identifying bottlenecks impeding scaled-up use of health technologies, while capacities for safety monitoring permit the detection and management of unanticipated adverse reactions in a timely manner. Resource allocation through evidence-based decision making – such as that achieved through health technology assessments (HTA) which provide for structured economic evaluation of health technologies – help to ensure predictability and sustainability of financing within the health system. The health delivery system defines each country’s ability to provide access to healthcare, which in turn relies on good supply chain management: the efficient planning, procurement and distribution of essential health technologies. Finally, there is need for strategic information and evidence that helps ADP tailor its support for optimal impact.

**Innovative platform for action**

In 2015, over 193 countries adopted the 2030 Agenda for Sustainable Development, comprising 17 Sustainable Development Goals (SDGs). Acknowledging the impact of TB, malaria and NTDs on human and social development, SDG 3 on health and well-being, has set an ambitious target to end the epidemics of acquired immunodeficiency syndrome (AIDS), TB, malaria and NTDs by 2030. The partnership between the Government of Japan and UNDP embodies the SDG approach through two complementary aspects:

First, the synergistic relationship between the GHIT Fund and the ADP promotes collaborative innovation for R&D of new medicines, diagnostic tests and vaccines for TB, malaria and NTDs and strengthens capacities of LMICs to access and deliver these new health technologies.

Second, the intersectoral approach shared by the GHIT Fund and the ADP – where relevant partners come together to jointly tackle issues that cut across a range of established operational silos and technical disciplines – is increasingly recognized as reflective of the kind of integrated partnership needed to deliver the SDGs, particularly with regard to SDG 3 on health and well-being, and the G7 Ise-Shima Vision for Global Health.
Snapshots of ADP results

The ADP works with a set of focus countries – Ghana, Indonesia and Tanzania, with Thailand as a technical resource partner – where it implements an extensive range of capacity-building interventions. The implementation process at the country level requires concerted and collaborative efforts at capacity strengthening, which should be undertaken in an integrated manner across the essential parts of the access and delivery value chain. The following summaries of focus country activities and outputs illustrate the ADP’s achievements to date, in particular where distinct project pathways have converged to create added impact.

**Ghana**

The ADP supported the Ghana Ministry of Health (MOH) in reviewing the National Medicines Policy (NMP) 2016–2020 and the development of a series of tools to facilitate a multisectoral approach to its implementation. The NMP provides a comprehensive approach to the governance of the pharmaceutical sector; and when implemented, will be an important step towards the goal of universal and equitable access. On delivery and uptake of new health technologies, the ADP collaborated with the Ghana Health Service (GHS) to develop a national health research agenda, which prioritizes implementation challenges in delivery of technologies for TB, malaria and NTDs. The ADP also strengthened a cohort of health researchers to plan and conduct IR, and has helped the GHS in mobilizing US$80,000 for two research studies on TB and lymphatic filariasis. The ADP is also supporting the Ghana Food and Drugs Authority to pilot individual case safety reports for direct consumer reporting of adverse drug reactions, thus filling a gap in the country’s management of pre- and post-approval safety data.

**Indonesia**

Given its goal of providing UHC for 253 million citizens by 2019, the Indonesia Government has prioritized affordability and cost-effectiveness of health technologies. To this end, the ADP supported the MOH in institutionalizing the HTA approach, which has been used to evaluate two new health technologies, generating findings for potential savings of up to US$6 billion over five years. The ADP also strengthened the national disease programme’s planning and procurement of TB commodities and diagnostics. In partnership with the national public procurement agency, the ADP developed a module that will be integrated into the national standard procurement training programme. Over 700 public health hospitals across Indonesia will be trained to plan, procure and distribute new medical equipment and health technologies. Partnering with the drug regulatory authority, the national TB Programme and pharmacovigilance teams in hospitals, the ADP developed and implemented best-practice pharmacovigilance approaches for the introduction of the new treatment for multidrug-resistant TB, Bedaquiline. This effort will contribute to addressing the treatment gap for an estimated 19,000 new MDR-TB cases annually. Importantly, the systems and capacities developed will also enable safety monitoring of other new health technologies when they are introduced in Indonesia.

**Tanzania**

The ADP is supporting a core group of national experts in conducting an economic evaluation for cost-effectiveness of the National Essential Medicines List, which defines the benefits package under the national health insurance scheme that currently covers almost 10 million beneficiaries at a cost US$82 million annually. This provides the starting point for the integration of the HTA approach within the decision-making processes around selection and introduction of new health technologies. With ADP support, the National Institute for Medical Research has set a national agenda for health systems research, developed a cohort of skilled national researchers, and has successfully raised US$160,000 in research funding. The ADP worked with the Tanzania Food and Drugs Authority on strengthening a safety monitoring and response system for adverse drug reactions. The ADP has also trained a cohort of almost 300 health care workers from facilities across 20 districts to manage a robust national pharmacovigilance system. The ADP supported the NTD Control Programme in strengthening institutional linkages and capacities to improve cost-effective and efficient delivery of country-wide mass drug administration (MDA) campaigns. Supply chain management guidelines and tools have been developed to support the training of over 3000 health workers for future MDA campaigns, which currently reach only half of the 49 million people at risk of NTDs.

**Regional**

Beyond the focus countries, the ADP has created forums and platforms for South–South learning and knowledge exchange to increase the impact of the project through dissemination of good practices from in-country activities. Strengthening the networks and engagement between experts from multiple disciplines has fostered regional communities of practice and facilitated sustained capacity-building. The ADP has held regional consultations, focusing on the Asian and African contexts, to increase awareness of the need for coherence between health, industrial and trade policies, so as to promote innovation and access to health technologies. The ADP has successfully built partnerships with, and developed the capacity of, over 500 policymakers, technical experts, academics and other stakeholders in over 20 countries.

To increase awareness of the ADP approach, the ADP has developed strategic and technical partnerships with regional and global organizations, including the African Union Commission and the East African Community; while in Asia, partnerships have been forged with the UN Economic and Social Commission for Asia and the Pacific (ESCAP) and the Non-Aligned Movement Centre for South–South Technical Cooperation.

As part of its continuing collaboration with the African Union (AU) Commission, the ADP supported the development and subsequent adoption of the AU Model Law on Medical Products Regulation. The Model Law provides a comprehensive framework to guide African Union Member States in the provision of an enabling regulatory environment for the private sector to deliver quality, safe and efficacious medical products and technologies to the African population.
GOVERNMENT OF JAPAN
The collaboration between the United Nations Development Programme (UNDP) and the Government of Japan is a strategic partnership to promote research and development, and to increase access to and delivery of health technologies used to address neglected tropical diseases (NTDs), tuberculosis (TB) and malaria.

UNITED NATIONS DEVELOPMENT PROGRAMME
UNDP partners with people at all levels of society to help build nations that can withstand crisis, and drive and sustain the kind of growth that improves the quality of life for everyone. On the ground in more than 170 countries and territories, UNDP offers global perspective and local insight to help empower lives and build resilient nations.

THE SPECIAL PROGRAMME FOR RESEARCH AND TRAINING IN TROPICAL DISEASES
TDR is a global programme of scientific collaboration that helps facilitate, support and influence efforts to combat diseases of poverty. It is hosted at the World Health Organization (WHO), and is sponsored by the United Nations Children’s Fund (UNICEF), UNDP, the World Bank and WHO.

PATH
PATH is an international nongovernmental organization that drives transformative innovation to save lives and improve health, especially among women and children. PATH works to accelerate innovation across five platforms – vaccines, drugs, diagnostics, devices, and system and service innovations – that harness entrepreneurial insight, scientific and public health expertise, and passion for health equity. By mobilizing partners around the world, PATH takes innovation to scale, working alongside countries primarily in Africa and Asia to tackle their greatest health needs. Working together with countries, PATH delivers measurable results that disrupt the cycle of poor health.

For additional information about the Access and Delivery Partnership, please contact:

Tenu Avafia
Team Leader: Law, Human Rights and Treatment Access
HIV, Health and Development Team
United Nations Development Programme
304 East 45th Street, FF-1194
New York, NY 10017
tenu.avafia@undp.org

www.undp.org
www.adphealth.org

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