



THE ACCESS AND DELIVERY PARTNERSHIP

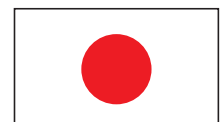
New Health Technologies for TB, Malaria and NTDs



The ADP Public Forum, Jakarta, Indonesia.

19 October 2016

On 19 October 2016, the Access and Delivery Partnership convened a Public Forum in Jakarta, Indonesia. The ADP Public Forum provided an opportunity for partners in Indonesia to highlight notable achievements of the ADP in the country, and to update stakeholders on the progress of the ADP's implementation. It was also an opportunity to engage with a wide range of Indonesian stakeholders, to share experiences and identify further opportunities to promote access to and delivery of new health technologies. The Public Forum, hosted by UNDP Indonesia, opened with keynote remarks from senior policy makers from the Ministry of Health, the Coordinating Ministry of Economic Affairs and the Commission for the Supervision of Business Competition, followed by panel discussions by ADP project and country partners from various government agencies.



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Resilient nations.*

From the People of Japan



The Indonesian context

Over the past four decades, Indonesia has made great progress in its human development index, including on the health indicators of the index. There are however, major development challenges that remain, as noted in the National Medium Term Development Plan 2015-2019. Significant effort is needed if the Sustainable Development Goals (SDGs) are to be achieved by 2030; including SDG3, which calls for universal health coverage (UHC) and access to safe, effective,

quality and affordable essential medicines and vaccines, as well as the elimination of tuberculosis (TB), malaria and neglected tropical diseases (NTDs).

The inequality of access to treatment and health services, especially in the remote parts of Indonesia, remains a critical challenge. Over a million Indonesians are currently living with TB, making up more than 10% of the world's TB burden. Although it was estimated in 2015 that there were 32,000 new cases of multidrug resistant TB

(MDR-TB), only about a third of these cases were detected and notified. Up to 5.3 million malaria cases and 12,000 malaria-related deaths occurred in 2013, but less than 1% of children with fever in malaria endemic provinces were treated with appropriate antimalarial drugs. In 2013, only half of the 71 million people who required preventive treatment for lymphatic filariasis received it.

To close these gaps in access to health, the Government of Indonesia has begun rolling

out important new initiatives. In addition to expanding the national health insurance scheme towards universal health coverage, the Government has also focused on scaling up disease prevention and treatment programmes, and strengthening leadership and technical capacity within the health system.



An integrated approach to access and delivery in Indonesia

As new, more effective health technologies become available, it is important to strengthen policy coherence and national health systems to ensure that these health technologies reach as many people as possible. While research and development (R&D) is crucial, it is insufficient on its own to deliver essential health technologies to communities and populations that need them. This is the rationale for the Government of Japan's support for the ADP, as well as the Global Health Innovative Technology (GHIT) Fund which stimulates

R&D in health technologies for neglected diseases. At the opening of the Public Forum, **Mr. Kozo Honsei**, Charge d'Affaires *ad interim* (Deputy Chief of Mission) at the Embassy of Japan in Indonesia, affirmed Japan's commitment *"to deliver medicines to patients in need through GHIT Fund and ADP, as part of our desire to find solutions to healthcare issues here in Indonesia."*



Led by UNDP in collaboration with TDR and PATH, with the support of the Government of Japan, the ADP is supporting the strengthening of national capacities in Indonesia to facilitate access to, and delivery of, new health technologies for TB, malaria and NTDs. Since its inception in 2014, the ADP has initiated a range of project activities, guided by a country workplan that was jointly developed with the Government and other country stakeholders.

The ADP seeks to promote an integrated and cross-sectoral approach, by bringing together a range of stakeholders to jointly address issues that cut across a range of established operational silos and technical disciplines in the access and delivery value chain. Such an approach is reflective of the partnerships needed to deliver the SDGs.

In his remarks, **Mr. Christophe Bahuet**, Country Director of UNDP Indonesia, stressed that the promotion of equitable access to social services and social protection is a key priority for UNDP Indonesia's country programme. As such, the ADP's work is an integral component and a key strategy towards meeting the SDGs, in particular SDG3 on health.



In his keynote remarks at the Public Forum, **Dr. Slamet Blasir**, Special Adviser to the Minister on Health Technology and Globalization, Ministry of Health (MOH), agreed with this approach. He noted that *"public health issues are not just the problem of the health sector, but of all sectors. So to solve public health issues, we need to communicate and cooperate with all sectors to overcome this problem."*



Pathways to access and delivery

At the Public Forum, a panel of experts, drawn from key country partners and government agencies from Indonesia, shared their views on the implementation of the ADP activities, which focused on capacity building within the key pathways to access and delivery, including policy coherence, implementation research, drug safety monitoring, evidence-based resource allocation and priority-setting, and procurement and supply chain management. These pathways help to lay the groundwork for successful introduction and scale-up of new health technologies.



Mr. Edy Putra Irawady, Deputy Minister for Trade and Industry Coordination at the Coordinating Ministry for Economic Affairs, in his keynote remarks, stressed the importance of policy coherence within the policy and legal framework. The ADP can substantially contribute to achieving this ideal because it

“promotes an integrated and coordinated approach towards access and delivery of health technologies... and supports and complements [Indonesia’s] national needs and priorities. ... these are extremely important strategic approaches.” An example can be seen in the ADP’s collaboration with the Commission for the Supervision of Business Competition (KPPU), which seeks to understand the role of competition law in promoting access to medicines.



In his keynote remarks, **Mr. Syarkawi Rauf**, the Head of KPPU, highlighted the need to improve policy coherence in a range of policies to ensure affordable access to medicines, including competition law and policy.

Dr. Siswanto, the Head of the National Institute of Health Research and Development, MOH, stressed the importance of implementation research to



identify and address barriers to the scale-up and use of health technologies. He acknowledged the ADP’s support in capacity building of MOH and research institutes on implementation research. The ADP has also helped build stakeholder consensus on the national implementation research agenda for TB, malaria and NTDs, which includes a focus on the elimination of schistosomiasis, MDR-TB identification and treatment, and enhancing the translation of research findings into policies.



Indonesia has been identified as one of five pilot countries where bedaquiline is being introduced to treat MDR-TB. **Ms. Siti Asfiah Abdoellah**, Head of the Sub-Directorate of Surveillance and Risk Analysis of Therapeutic Products, the National Agency for Drug and Food Control (NADFC), described current efforts to strengthen the national pharmacovigilance system, so that there is effective management of any adverse drug effects where a new health technology is introduced to the population. The ADP is supporting the NADFC in building capacities for active monitoring, reporting and management of adverse effects, including for the effective and safe introduction of bedaquiline.

The ADP also supports MOH on improving evidence-based resource allocation and priority-setting through the health technology assessment (HTA) approach. **Prof. Sudigdo Sastroasmoro**, Chair of the HTA Committee, MOH, highlighted the ADP’s role in supporting the HTA Committee in piloting the HTA evaluation for two new health technologies, which generated findings that will lead to significant cost savings. He noted the need for the ADP’s continuing support on the institutionization of the HTA, which will provide the evidential basis on population health and budgetary impact for decision-making on inclusion of health technologies in the national insurance benefits package.



The ability of the health system to provide universal access to health care depends on effective procurement and supply chain management of essential health technologies. **Mr. Ichwan Nasution**, Deputy



Director for Learning Resources at the National Procurement Agency (LKPP), spoke about the development of the training module for planning and procuring of medical and laboratory equipment and other health technologies, which the ADP supported. Through this training module, sub-national public procurement units will be able to strengthen capacities to plan, procure and distribute medical equipment and health technologies, particularly new TB medicines and diagnostics.

Working across these sectors and disciplines, the ADP seeks to build country ownership and strengthen sustainability of the systems and capacities for access and delivery. The Public Forum sought to build greater awareness of these efforts, with the aim that – as stated by Mr. Honsei in his opening remarks– *“the public forum will promote an understanding of the efforts made through the ADP and lead to greater achievement by the ADP in the future.”*




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