

The Medicines Transparency Alliance (MeTA): Towards an equity and poverty focus

Workshop agenda

4-5 October 2007, London

Background

The Medicines Transparency Alliance (MeTA) is a multi-stakeholder initiative to develop a new approach for increasing accountability and transparency in the selection, procurement, sale and distribution of essential medicines and health commodities in developing countries, with the ultimate goal of increasing access to medicines.

MeTA's approach is intended to be country driven, and promotes multi-stakeholder participation for improving accountability and transparency. Each participating country is likely to establish a multi-stakeholder MeTA Forum, mirrored by a multi-stakeholder MeTA Forum at global level. Scoping studies have been undertaken in seven countries: Ghana, Kyrgyz Republic, Jordan, Peru, the Philippines, Uganda and Zambia. Its initial pilot phase will run for approximately 2 years.

MeTA also plans to support a programme of research on relevant access to medicines issues.

What does a poverty and equity lens mean for MeTA?

Equity issues in access to medicines arise at several levels:

- i) international level, including trade-related and intellectual property issues, corporate social responsibility, supply and procurement issues;
- ii) national supply chains and health systems (public, NGO, formal and informal, private); and
- iii) individual/household and community levels.

One of the issues for MeTA is to understand how it can focus its energies at international and national levels to promote more equitable access to medicines at household and community level. This means understanding the barriers that poor and socially excluded people face in accessing medicines, and how these relate to supply chains, markets and public procurement. A specific challenge is to ensure that MeTA's transparency and accountability focus, and multi-stakeholder approach, offers benefits to poor people, in terms of both access and inclusion.

Context and objectives of the meeting

This meeting arises from the recognition that there is much relevant work on different aspects of equity in access to medicines. MeTA would like to learn from this work and facilitate sharing of experience and insights on these issues, which are likely to be an important stream of work for MeTA's research network. Given MeTA's focus on medicines supply and procurement, the workshop aims to identify:

- What can MeTA learn and adapt from broader work on poverty and other barriers to access to medicines?
- How can increased transparency and accountability in markets, supply chains and procurement contribute to achieving equitable access?

In relation to these objectives, the workshop will address key questions:

- How do limited transparency and accountability undermine poor and socially excluded people's access to medicines?
- How (and at what points in the medicines chain and on what issues) would greater transparency make a difference? What is needed to achieve greater transparency?
- How (at what points in the medicines chain and on what issues) would greater accountability make a difference? What is needed to achieve greater accountability?
- Within MeTA's scope, what complementary data and actions are needed to promote poor and socially excluded people's access to medicines? Are there additional foci or activities that MeTA needs to emphasise to promote approaches that take poor people's interests into account?
- What are the key knowledge gaps in relation to equitable access to medicines, and how can they be filled?

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The workshop aims to:

- identify the priority issues on poverty and equity for MeTA, drawing on existing knowledge, approaches and methodologies; and
- explore how increased transparency and accountability in markets, supply chains and procurement can contribute to achieving equitable access

Day 1: Thursday 4 October, 14.00-17.30

Time	Session topic	Output	Presenters
14.00 – 14.15	Welcome and Introduction	Workshop overview and objectives	Facilitator: Nel Druce, HLSP Jillian Popkins, DFID Business Alliances Team
14.15 – 15.30	<p>Session 1 What does a poverty and equity lens mean for MeTA? Presentation: overview of MeTA scope, pilot countries, poverty and equity concerns</p> <p>Discussion: 1. What are the key issues affecting access to medicines for poor and excluded populations?</p>	Key priorities and results identified for MeTA's impact on poverty and equity at international, national and community/ household levels.	Danny Graymore, DFID Business Alliances Team
15.30 – 15.45	Tea/coffee break		
15.45 – 17.30	<p>Discussion continued (in working groups if needed)</p> <p>2. What issues should/can MeTA specifically seek to address through improving accountability and transparency?</p> <p>3. What results should MeTA aim for in these areas, and at different levels?</p> <p>4. What complementary actions are needed?</p> <p>Wrap-up</p>		

Day 2: Friday 5 October, 9.30 – 16.00

Time	Session topic	Output	Introductory speakers
9.30 – 9.45	Day 1 recap – Priority issues for MeTA		Nel Druce
9.45 – 11.00	Session 2 Policy and practice options a) MeTA's scope b) what do existing frameworks offer – human rights and access to medicines	Strategies and research needs identified for addressing priorities	Rachel Marcus, Human Development Group, DFID Paul Hunt, UN Special Rapporteur on the Right to Health
11.00 – 11.15	Tea/coffee break		
11.15 – 12.30	Session 2 continued. b) approaches at global and country level eg strategies for increased participation and representation in multi-stakeholder approaches; national and local activities		Patrick Mubangizi, HAI Africa
12.30 -13.30	Lunch		
13.30 – 15.30	Session 3 Tools, methods and information needs a) quantitative and qualitative methods to assess burden of disease, equity and access (eg availability, use, affordability, benefit incidence) b) tools to assess and measure inclusion (eg participation and representation)	Summary of existing tools and gaps in knowledge	Dennis Ross-Degnan, Harvard Medical School Andrew Chetley, Healthlink Worldwide
15.30 – 16.00	Wrap-up and next steps	Agreed next steps for MeTA	