



UNITAID

(A new innovative mechanism for scaling up access to medicines and diagnostics for HIV/AIDS, TB and malaria)

OECD GLOBAL FORUM ON DEVELOPMENT

(Paris, 7th October 2008)

Jorge Bermudez, Executive-Secretary, UNITAID

Medicines are in the North, patients in the South

Less developed countries represent:

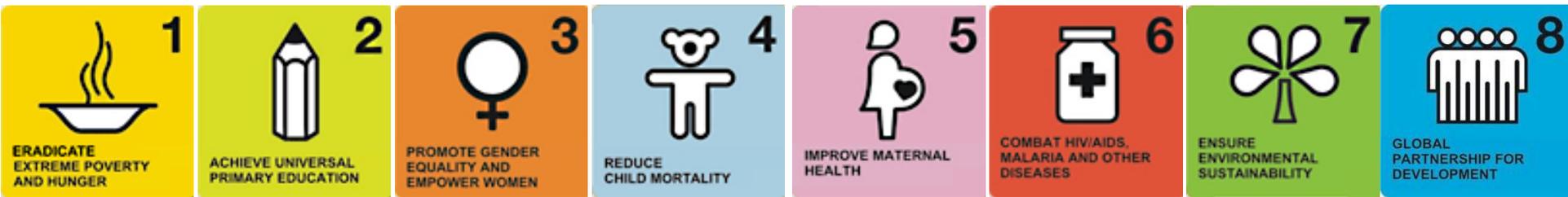
84% of the world population

Less than **11%** of the global
health expenditure

More than **93%** of the disease
burden globally



The “Millennium Goals”: a hope for Humanity



2000 UN Millennium Summit: the General Assembly of the United Nations adopted the Millennium Declaration.

Urgency to “free our fellow men, women and children from the abject and dehumanizing conditions of extreme poverty to which more than a billion of them are currently subjected.”

8 Goals linked to 18 quantified targets

Context for UNITAID



- Monterrey consensus on financing for development (March 2002, 50 Member States)
- The MDGs (New York, 2000)
- 44 countries discussing innovative ways for financing development
- The Global Action against Hunger and Poverty launched by President Lula (September 2004, 111 Member States)
- The Paris Declaration on Aid Effectiveness (March 2005, 100 Member States)
- Global Health landscape
- Globalization, Trade and Health

*"There is a 'fundamental imbalance' with the world spending **US\$900bn** on defense; around **US\$325bn** on agricultural subsidies and only **US\$50 to 60bn** on aid."*

James Wolfensohn
Former President of the World Bank

Why UNITAID ?



- Unaddressed issues at stake: medicines for children, second-line treatments...
- A plus to existing initiatives (additionality), supporting the worst affected and most vulnerable countries
- A new and innovative mechanism for financing treatment
- Long-term funding: manufacturer-attractive
- Global forecasting ensures supply; a comprehensive approach to access addressing demand and supply factors
- Building solid and strong partnerships with current initiatives
- A multi-dimensional approach (addressing quality, regulation, IPR, pricing, in-country support for supply systems)
- Influencing the Health Agenda

- **UNITAID mission** is to reinforce access to treatments against HIV/AIDS, malaria and tuberculosis for the poorest populations in developing countries **by reducing prices of quality medicines and diagnostics and by speeding up their availability**

General principles:

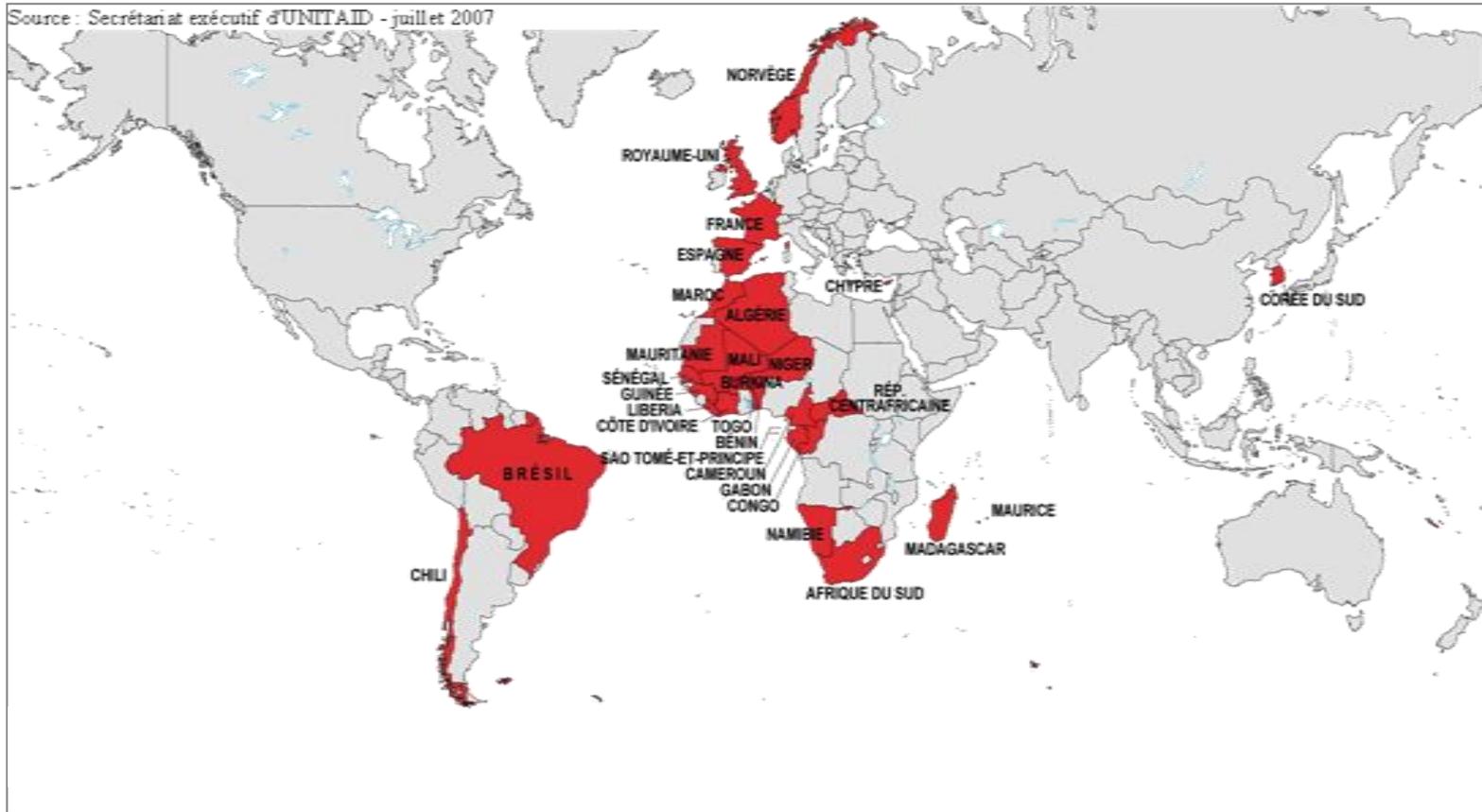
- *innovative and long term funding mostly based on a tax on air tickets (368 M\$ budget)*
- *tool dedicated to impact the drugs / health products markets*
- *complementarity with existing initiatives,*
- *addressing specific niches,*
- *solidarity and efficiency of the aid,*
- *adaptability,*
- *independence,*
- *transparency and accountability*

Five founding countries (September 2006)



Official signature of the **five founding countries** when UNITAID was launched, on 19 September 2006, at the United Nations General Assembly, New York

Now UNITAID counts 27 countries



From 5 founding countries:
Brazil, Chile, France, Norway, UK



Now: 27 member countries
& the Gates foundation

Countries contributing to UNITAID



Tax adopted :

-  - France
-  - Chile
-  - Cote d'Ivoire
-  - Congo
-  - Mali
-  - Madagascar
-  - Mauritius
-  - Niger
-  - Republic of Korea

 - Norway (CO2 tax on kerosene)

Budget contribution :

-  - Spain
-  - United Kingdom

Countries committed to implement the tax : Benin, Brazil, Burkina Faso, Cameroon, Cyprus, Gabon, Guinea, Liberia, Mali, Morocco, Namibia, Central African Republic, Senegal, Sao Tome & Principe, Togo

Countries committed to implement a budget contribution : South Africa

Impact of the levy: the French exemple

Tax received on each ticket by UNITAID <i>(in France)</i>	Economy class	First class or business
Flight in France or in Europe	1 € <i>Antimalarial treatment for 2 children</i> ex: flight Paris - Berlin	10 €
International flight	4 €	40 € <i>1 HIV-positive child under treatment for 1 year</i> ex: flight Paris - Dakar

An aircraft with 300 passengers on board leaving from Paris will cover the treatment for 1 person with multi drug resistant tuberculosis (MDR-TB), which is very expensive (approx. 4.000 \$)



Furthermore... no economic impact on air traffic

UNITAID use of funds allows to:

- 1/ Impact markets and **reduce prices**: more drugs for same budget
ex: price reduction on pediatric (- 40%) and 2nd line ARVs (-25% to – 50%)
- 2/ Have manufactured medicines **better adapted** to patient needs
ex: first fixed dose combinations for pediatric ARVs in 2007
- 3/ Contribute to address **quality issues** (incentive for manufacturers to invest)
ex: support to WHO program for prequalification of products
- 4/ **Deliver rapidly medicines** in the countries in need (basic model - medicines instead of funds)
ex: treatments already provided in a number of countries for ARV, TB and ACT

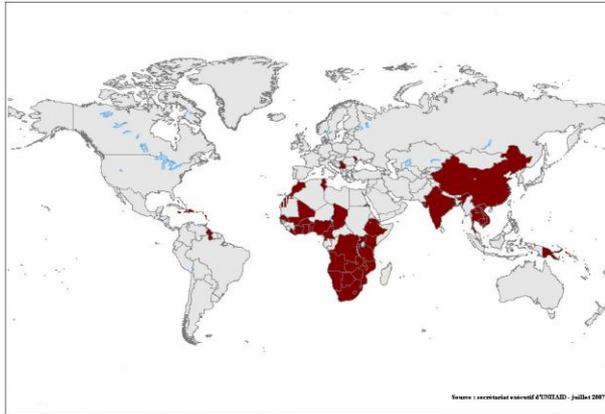


TOGETHER TO HEAL

- Facing a global state of emergency, UNITAID contributes to bring solutions
- In two years, UNITAID has already achieved major results...

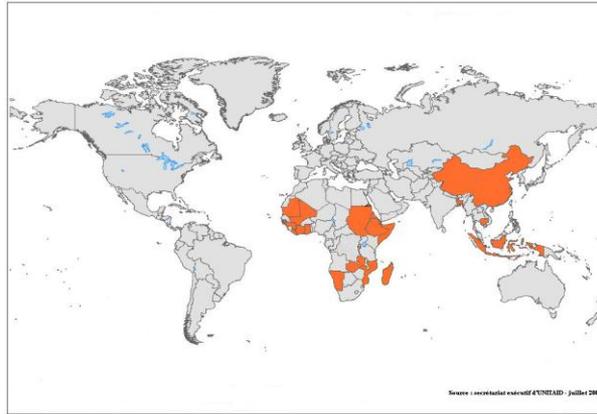
UNITAID ongoing actions

More than 80 countries already receive UNITAID support...



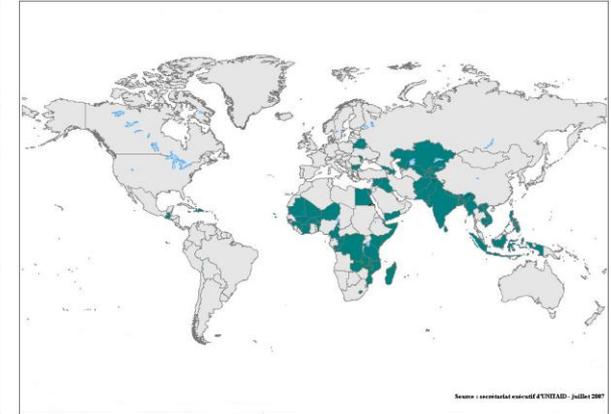
HIV / AIDS
53 recipient countries

- Pediatric ARV
- Second line ARV
- PMTCT



Malaria
22 recipient countries

- ACT
- LLIN



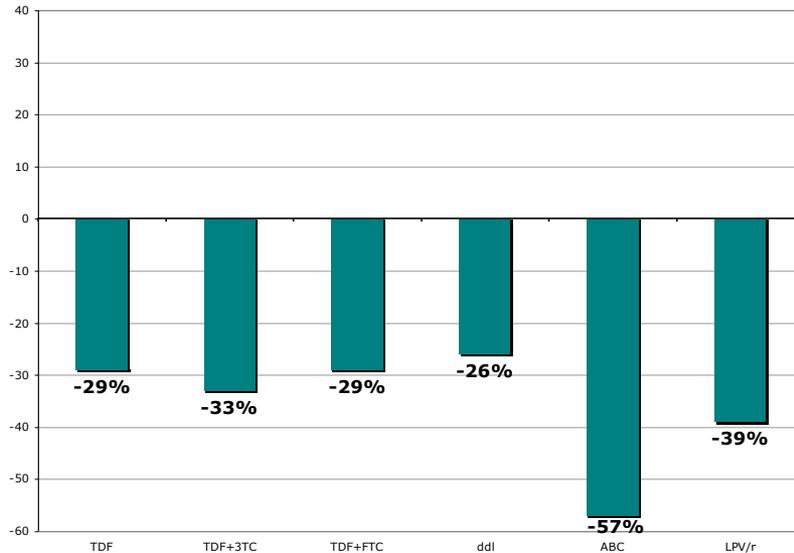
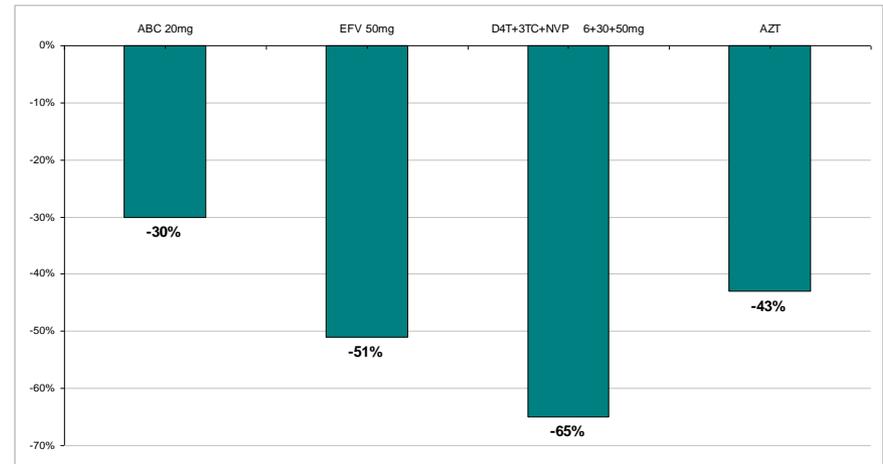
Tuberculosis
58 recipient countries

- First line TB
- Pediatric TB
- MDR-TB
- Diagnostics

First significant price reductions



30 November 2006
on antiretroviral
for HIV positive children
(with the Clinton foundation)



8 May 2007
on second-line
antiretroviral
(with the Clinton foundation)

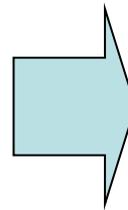
With UNITAID funding, new treatments put on the market against HIV/AIDS are more adapted :

- Dosages **well adapted for children use**
- Medicines to be taken in the form of tablets (*fixed dose combination*)
- **Heat stable** products: no refrigeration needed anymore
- **No need to dilute** them in water (problem of access to drinkable water in some countries).
- One FDC/ Cipla **FDA tentative approval**/ WHO Pre-qualified, August 2007

Better products at lower price

Before:

Single dose syrups
16 bottles of syrup monthly
200\$ per patient per year



Now (partnering with CHAI):

Fixed dose combination
3 tablets a day
60\$ per patient per year



- ❑ Consolidate current niches and necessary transitions with partners
- ❑ Identify areas to expand (diagnostics...)
- ❑
- ❑ *VSC (a worldwide citizenship solidarity contribution)*
- ❑ *Moving towards a patent pool*

The innovative funding



“Finding new flows of development finance is crucial if the world is to meet its ambitious series of anti-poverty goals by the target date of 2015.”

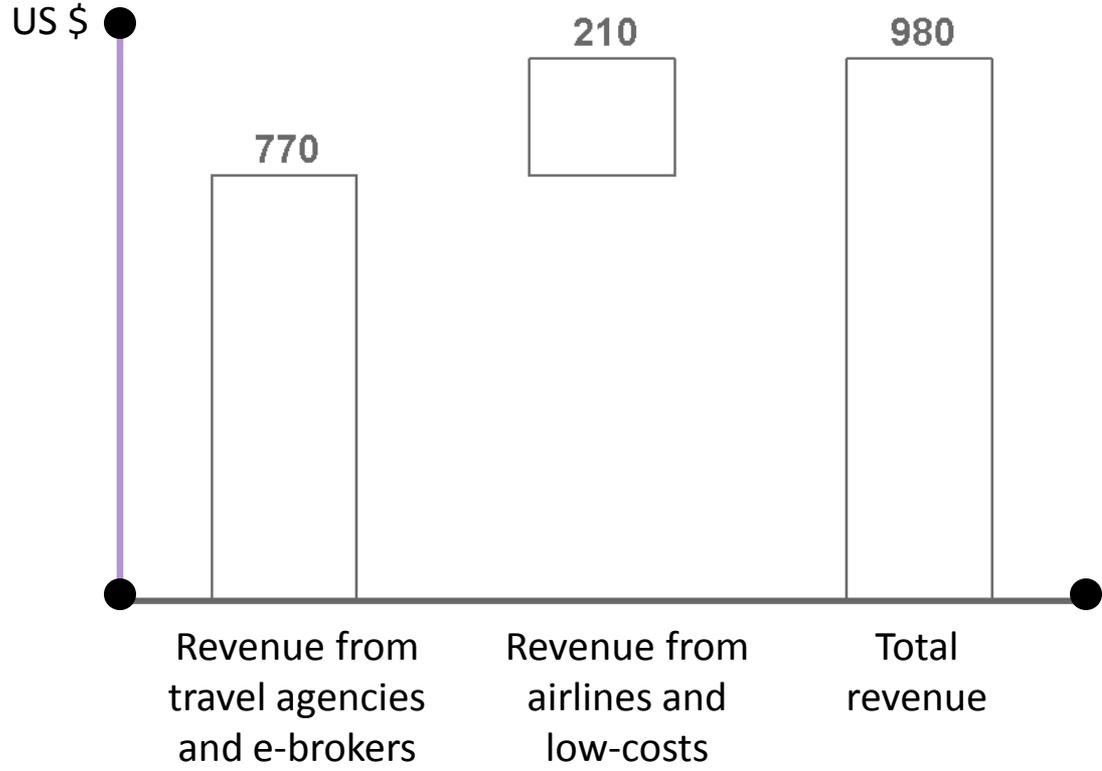
UN Secretary-General Ban Ki-Moon

UNITAID : a lab for the innovative financing



Next Step : Voluntary Solidarity Contribution

Total revenue expected : Up to **\$1 billion** by 2011



UNITAID : a lab for the innovative financing



Voluntary Solidarity Contribution : a revolutionary concept to build a better world

- Building an **international citizenship** by boosting international solidarity
- Setting the standards of **total traceability** for improved transparency and better governance





Making Globalization equitable



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What is UNITAID



UNITAID is an international drug purchase facility, established to provide long-term, sustainable and predictable funding to increase access and reduce prices of quality drugs and diagnostics for the treatment of HIV/AIDS, malaria and tuberculosis in developing countries.

Appointment of Philippe Douste-Blazy as Special Adviser on Innovative Financing for Development



U.N. Secretary-General Ban Ki-Moon appoints Chairman of UNITAID's Executive Board Philippe Douste-Blazy as Special Adviser on Innovative Financing for Development, with the rank of Undersecretary-General of the U.N.
19 February 2008

[More information](#)

News

Visit of Mr Philippe Douste-Blazy and Dr Jorge Bermudez to Burkina Faso

14-16 February 2008
Mr Philippe Douste-Blazy, Chairman of UNITAID's Executive Board, and Dr Jorge Bermudez, Executive Secretary, met with top country officials, who reaffirmed Burkina Faso's commitment following its joining UNITAID in February 2007. This visit allowed Mr Douste-Blazy and Dr Bermudez to meet the representatives of the non-governmental organizations and the country patient associations, and to participate in a working group meeting with the General Directors of ACAME.

[Read more...](#)

Film "Malaria, the Serial Killer" hosted by UNITAID and Roll Back Malaria Partnership

5 February 2008

"We welcome the showing of this film to a wide audience to raise global awareness on the challenges of preventing and treating malaria," said Dr Awa Marie Coll-Seck.

"We are very glad to co-chair with RBM this important presentation within WHO, as we partner to scale-up access to diagnostics and treatment for malaria.", added Dr Jorge Bermudez

[Read more...](#)

"UNITAID, the power of commitment" emphasizes WHO Director General

21 January 2008

Opening the 122nd WHO Executive Board Session in Geneva, with a Plenary full with the representatives from the EB Member States, more than 50 Member States not represented in the Board, UN and related Organizations, specialized agencies, intergovernmental organizations and NGOs, WHO Director General Dr. Margaret CHAN praised UNITAID as an example, addressing the audience with optimism about the latest public health responses against HIV/AIDS, TB and Malaria.

[Read more...](#)

Map Center

Member States, programs...

[click here to access the Map Center](#)

Invitation to submit concept notes

Public invitation to submit Concept Notes for Innovative Projects and Proposals

Deadline for submission of Concept Notes: 29 February 2008, 17:00 local time Geneva, Switzerland (GMT+1)

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Employment opportunities

Current vacancies
- Market dynamics expert
- Procurement Officer

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