

Partnership

Public-private partnerships are vital instruments in the battle against HIV. The APG calls on governments, non-governmental organisations, communities and other private sector groups to join partnerships, specifically aimed at enhancing access to medicines in the developing world.

The Global Alliance for Vaccines and Immunisation (GAVI) is committed to making current, and future, pneumococcal vaccines available in the world's poorest countries. An Accelerated Development and Introduction Plan (Pneumo-ADIP) was created by GAVI in 2001, and **Wyeth** has been collaborating with the Pneumo-ADIP team ever since.

Wyeth is working closely with GAVI/Pneumo-ADIP to develop an affordable and sustainable programme to deliver its current pneumococcal vaccine, Prevenar – as well as its next generation 13-valent pneumococcal vaccine (in clinical development) – to the poor countries of Africa, Asia and Latin America.

A critical milestone of this collaboration in 2008 is the Phase 2 implementation (and distribution) of Prevenar in targeted GAVI countries.

In 2001, the **Abbott** Fund supported the Baylor College of Medicine in establishing a clinical model for treating children with HIV. The first clinic was opened in Constanta, the epicentre of HIV in Eastern Europe. Paediatric mortality at the clinic was reduced by 90 per cent in three years. To help advance the care and treatment of children with HIV/AIDS, the Abbott Fund has provided a grant to link with other Baylor paediatric clinics through the creation of the Baylor Children's Clinical Centres of Excellence Network. Key areas of focus include training healthcare professionals, conducting research, and knowledge sharing, with an additional grant to fund a related fellowship programme.

In 2003, recognising that drugs alone cannot cure multi-drug resistant tuberculosis (MDR-TB), **Lilly** launched its pioneering partnership to fight the rapidly growing pandemic. Today, with partner operations in over 50 countries and a large financial commitment, the Lilly Partnership continues to fight the increasing global threat of MDR-TB. The Lilly MDR-TB Partnership comprises several public and private partners, including Aspen Pharmacare (South Africa), International Council of Nurses, International Federation of Red Cross and Red Crescent



Societies, International Hospital Federation, Harvard Medical School and Partners in Health (PIH), Hisun Pharmaceutical (China), Purdue University US, Shasun Chemicals and Drugs (India), SIA International (Russia), TB Alert, TB Survival Project, US Centres for Disease Control and Prevention, World Economic Forum, World Health Organisation (WHO), Stop TB Partnership and the World Medical Association.

For five years the Lilly Global Partnership has supported a comprehensive, multi-pronged strategy to fight this disease,

working primarily in China, India, Russia and South Africa. This 360-degree approach works to promote community support and patient advocacy, involving communities and business in MDR-TB prevention and treatment. It is used to implement MDR-TB healthcare and training programmes, strengthen surveillance of drug resistance, transfer Lilly drug-manufacturing technology to local pharmaceutical companies and supply medicines at concessionary prices. Conducting research for new drug discovery and working with policymakers to raise awareness and prevent the spread of MDR-TB is hugely important for the future.

Since 2000, the *African Comprehensive HIV/AIDS Partnerships* (ACHAP) in Botswana, sponsored in partnership by the Government of Botswana, The Bill and Melinda Gates Foundation and **Merck & Co., Inc.** have supported and enhanced Botswana's national response to the HIV epidemic. Projects include:

- Improving the effectiveness and availability of voluntary testing, referral and diagnostic services
- A condom distribution and marketing programme, including the installation of more than 10,500 condom dispensers providing free condoms throughout the country
- Providing small grants to fund community-based initiatives
- Establishing support and counselling services, including faith-based services, pre- and post-test counselling and interventions targeting youth and other vulnerable groups
- Implementing awareness, knowledge and de-stigmatisation campaigns through the national education and broadcast systems
- Healthcare worker training encompassing both theoretical and practical aspects.

While more work remains to be done, ACHAP has been extraordinarily successful in fulfilling its mission to date, and according to the Chronicle of Philanthropy¹, “...the United Nations now hails the country as a bright spot in sub-Saharan Africa’s mortal struggle with the pandemic”. Botswana currently has more than 90,000 patients on anti-retroviral therapy, representing at least 80 per cent of people who need treatment. This is an impressive achievement, when one considers five years ago, less than 5 per cent of people needing treatment

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were receiving it. Currently, there are more than 1,000 new patients enrolling in the national treatment programme each month. 85 to 90 per cent of all patients are adhering to treatment (compared to 70 per cent in the U.S.). To date, Botswana is 1 of only 3 countries in Africa to have achieved its treatment goals under the WHO 3 by 5 Initiative² guidelines.

“*Mobilize Against Malaria*” is **Pfizer’s** latest initiative to help close critical gaps in malaria treatment and education in sub-Saharan Africa. The programme was set up in partnership with international and local experts to evaluate programme interventions and to share findings and best practices with other organisations addressing the malaria epidemic. Pfizer is working together with key international and local health experts to develop and implement public health interventions that engage and educate treatment providers and patients in high-risk areas for the effective treatment and management of malaria. This three-country initiative comprising Kenya, Ghana and Senegal is being implemented over the course of five years (2007-2011).

In Ghana, Pfizer works in partnership with Family Health International and Ghana Social Marketing Foundation to comprehensively train the informal sector of Licensed Chemical Sellers in selected districts to promote effective malaria

1. Wilhelm, Ian. “Gates Programme in Botswana Offers Lessons on Fighting AIDS.” Chronicle of Philanthropy, (November 11, 2004).

2. Information regarding the ‘3 by 5 Initiative’ can be found at: <http://www.who.int/3by5/en/>



symptom recognition, proper treatment and referral of acute cases. In Senegal, Intrahealth is training community health workers and nurses serving in the Tambacounda Region and documenting the benefits of malaria treatment messaging in the health system. In Kenya, Pfizer is working with Population Services International to promote symptom recognition and treatment-seeking behaviours at the household level, with an emphasis on pregnant women and children under five, using antenatal clinics in western and coastal provinces as an entry point to these target groups.

To lead the overall strategic effort and coordinate global monitoring and evaluation of the programmes, the London School of Hygiene and Tropical Medicine is working in partnership with Pfizer and with local evaluation and implementation partners to share lessons learned and

best practices with other organisations addressing the malaria epidemic.

Since 2003, **Johnson & Johnson** has partnered with organisations such as the Elizabeth Glaser Paediatric AIDS Foundation (the Foundation) to expand opportunities for HIV-infected mothers to access effective interventions and to prevent transmission to their children. The Foundation provides antenatal counselling to pregnant women, encourages HIV/AIDS testing, and refers women to additional care if their results are positive. Additionally, the Foundation partners with local health workers to provide anti-retroviral drugs to women and their infants before and directly after birth to help prevent infants from becoming infected during delivery.

“HIV-infected children have a 50 per cent chance of dying before their second birthday,” says Trish Karlin, Vice President of

programmes for the Foundation. *“Preventing the infection and offering treatment to families is extremely important because these children really don’t have a chance of survival unless you deliver the care that they need.”*

- Since the partnership began, more than 860,000 pregnant women in 10 countries have been reached with counselling, and 760,000 women have received HIV testing, with more than 39,000 women testing positive and receiving ARV treatment (as of June 2007).

The **Bristol-Myers Squibb Medical Research Fund** has become an active partner with the medical community, particularly in South Africa and Botswana, where many successful public-private partnerships have developed. Significantly, these partnerships spanning academia, industry, government, and communities, support the principles put out by the governments of the countries concerned and both emphasise and support their commitment to finding innovative ways of care and treatment. Outcomes from research funded by the *BMS Medical Research Fund* seek to provide practical and sustainable solutions for patients in settings where resources are limited but needs are great. With women and children as the primary beneficiaries, studies to date have generated effective and relevant clinical data which is shared with the African medical communities. One such example is the Botswana HIV Reference Laboratory. *BMS Secure the Future* partnered with the national government and the Harvard AIDS Institute to create a technologically advanced laboratory in the grounds of the country’s biggest hospital, Princess Marina. Projects underway at the laboratory include vaccine research, a large scale research study of anti-retroviral therapy to treat AIDS and HIV infections, and skills transfer and capacity development.

In 2005 Organon, a part of **Schering-Plough**, established a programme focusing on strengthening adolescent sexual and

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reproductive health services at selected factories and health facilities in the Laos People’s Democratic Republic. This initiative focuses on the reproductive health needs of factory workers in Vientiane City and Pakse and of urban youth living in both cities. This programme was created in partnership with the Department of Public Hygiene and Prevention, and supervised by the Ministry of Public Health.

Reproductive health awareness-raising activities and basic reproductive health services have been implemented through the use of mobile Maternal and Child Health teams. Approximately 1,000 factory workers, (of whom more than 90 per cent are women), aged 16 to 25, have been served by this programme. A key part of the project has been the establishment of a peer education structure within the factories participating in the programme. In addition, “youth friendly” reproductive health service facilities have been established at local clinics to increase the accessibility to reproductive health information.

Together with the Ministry of Education, a pilot programme has been running within secondary schools in Vientiane City and Pakse. The curriculum includes education modules for students and training for the teachers required to deliver the information.