

Bracing for another delay - open innovation at the WHO?

By SOPHIE BLOEMEN, Advisor to Health Action International

Open innovation, open access, crowd-sourcing innovation, innovation prizes... All are buzzwords we often hear in the media, employed by entrepreneurs, government officials or science journalists. The terms have become part of the discourse on innovation and science; companies crowdsource their data and innovation, governments are opening up their data to allow for civic participation in innovation, [open access publishing](#) is gaining major ground, the US government now mandates it where government grants are involved. Various ideas and arguments play a role here. Moral arguments about social justice and public goods are certainly important, but so are ideas on effectiveness and models of innovation. Although numerous people have been working on open innovation initiatives for many years, the familiarity of these terms is a pretty recent phenomenon.

UN institutions are usually not associated with cutting edge ideas. Yet the [World Health Organization](#) (WHO) was actually ahead of the curve; its member states were discussing open innovation ideas on research and development for medicines a decade ago. Why? Because it is urgent. Because people are sick and dying. Because the current bio-medical innovation system is unjustifiable.

The health R&D system excludes a large part of the world population in its business model and does not provide the innovation where it is most needed. It focuses on wealthy markets. The pharmaceutical industry can charge monopoly prices on life saving medicines with their markets being protected by intellectual property rights. It is not so much up to companies to change this; they are merely agents limited in their outlook trying to maximize profits. It is up to countries and international governmental organisations to change the incentives and institutional framework for health R&D. Unfortunately, the WHO is no longer ahead of the curve. It has not been able to do anything substantial with proposals on new open models of innovation.

At the World Health Assembly this week, delegates from countries all over the world will come together to discuss an agenda that ranges from discussion on universal health coverage to health in Palestinian territories and WHO Reform. One of the agenda items to be discussed is a global framework for health R&D; finding a comprehensive solution to the broken research and development system, which excludes so many and innovates so little where it is really needed.

There is a wealth of ideas for the architecture and features of such a framework. The best proposals include open innovation approaches and the sharing of knowledge, where medicines are created as global public goods accessible to all. After years of negotiations and struggle, industry influence scandals, reports and country consultations, a special high level

[expert commission](#) looked at proposals and produced a report. They recommended, in part, negotiations for a binding intergovernmental convention to start, and ingraining open knowledge innovation and affordable access to resulting products into any roadmap countries agreed to.

The issue is however, that vested interests are pretty happy with the status quo and are not about to let the health R&D system move into the 21st century. So, they are holding on, delaying, having the EU and US drag their feet and even sabotage the process as reported in the [Atlantic](#) this month.

Not always with good arguments, but always with strong bargaining powers. This year, again at the end of May, we brace ourselves for more non-ambition of Member States and the WHO, which have the joint responsibility for the health of all world citizens. We do hope that finally some meaningful steps will be taken towards a structural solution: An intergovernmental framework on bio-medical R&D.