

Staff Spotlight: Tim Reed

A famous man, John Quincy Adams, once said, “If your actions inspire others to dream more, learn more, do more and become more, you are a leader”. Mr Adams was the sixth president of the United States of America—and the first to give an interview to a female journalist, Anne Royall, which was quite progressive for his time. (We’ll keep secret that he didn’t have a choice because she took away his clothes while he was bathing and threatened not to give them back until he had answered her questions.)

But back to Adams’ quote on leadership, which perfectly describes the “leader” that we’d like to introduce to you with this blog post: Health Action International’s (HAI) very own Executive Director, Tim Reed.

It should be said that, as a result of his modesty, Tim will strongly dislike being compared to Adams’ quote. But, in reality, he truly creates an environment that allows his team to dream more, learn more and become more. Tim leads by example, infecting others with his passion for access to medicines policy and lending an ear/providing strategic advice to members of our entire team. And with 20 years of experience in NGO management, a weakness for little-known topics like snakebite, and an instinct to bring the right people together, Tim hustles things on, not only at HAI, but also on the global health agenda.



HAI’s executive director, Tim Reed, starts talking about delivering snakebite antivenom by drone if he’s losing someone in a conversation.

Fighting for the Human Right to Health

What is your role at Health Action International?

I have had various job titles since I joined HAI in 2006, but they have all been ‘Director’ of some sort. Currently, Executive Director.

What are three words to describe HAI?

Integrity, professionalism, influence.

“We can move into areas that no other organisation has dared to tread.”

What is the most interesting aspect of your field of expertise?

My training, or my expertise, is in the politics of pharmaceutical regulation and how that

impacts public health. So everything for me comes down to the politics, with a small p and a large P. This means conflicts of interest, capture, corporate bias and so on, but also the engagement of nation states in protecting the corporate interests of industry over the interests of public health. And all points in between. Secondly, with the HAI team, I get to lead strategies that operationalise that view—it means we can move into areas that no other organisation has dared to tread, or add our expertise to a field of medicine which has neglected the politics of medicine.

“Everyone, without exception, is interested in health, and everyone is interested in medicine.”

How do you make people interested in your topic?

Actually, it's not that difficult—I think all the HAI team are passionate about inequitable access to medicines, and the massive irrational use of medicines. There is nothing quite so infectious as passion in a subject to interest others. And everyone, without exception, is interested in health, and everyone is interested in medicine. The sometimes-astronomic cost of medicines, why medicines do or don't work, why we have medicines for manufactured diseases and why we don't have medicines for the global killers—the list of topics is endless. And if I am losing someone in conversation, I can always talk about snakebite antivenom, which seems to excite everyone. And just for good measure I can talk about delivery of antivenom by drone—that really gets people going, especially men. Odd that.

“There is nothing quite so infectious as passion in a subject to interest others.”

What do you wish people would be more aware of?

That things can change—that a professional, evidence-based and expert civil society can change even the global order of how public health can be promoted over the interest of commerce. And at the same time, things would be a whole lot worse, in terms of the safety, efficacy, availability, price, etc. of medicines, if organisations like HAI were not there fighting for the human right to health.

What do you like most about working at HAI, and what have you gained from working here?

It sounds contrived, but it is an amazing privilege to work with such an incredibly passionate and knowledgeable team at HAI and with the most extraordinary global network of determined experts who have chosen to promote public health through access to medicines and the rational use of medicines.

“I would like to reverse Brexit.”

If you could choose one policy recommendation to be accepted and turned into

undisputed policy tomorrow, what would it be?

Personally, I would like to reverse Brexit, which is an abomination, but I think you mean in terms of medicines... I am betraying my core politics here, but if I am given a completely free hand, and can dream, I would like to see policies aimed at nationalised pharmaceutical manufacturing. My PhD research was in Central and Eastern Europe, where central planning made the pharmaceutical industry an integral part of the health system. Research was publically funded at universities and institutes and the manufacturers produced only medicines that were needed—it was an entirely public health-orientated system. Gone were drugs of no therapeutic value, only drugs that matched the needs of the population were manufactured and all funded by the state. Now there's a utopian vision...

Never was so much owed by the few to the many!

And can I have another policy recommendation? It would be an international agreement that breaks the stranglehold the global intellectual property (IP) regime puts on innovation and the availability and affordability of medicines. IP stifles innovation of needed medicines for the majority of the world's population and puts worthy medicines out of financial reach of those who need them, even in the rich countries of the north. We must delink the cost of R&D from the price. We have thousands of years of scientific endeavor, and the most amazing mind-blowing technologies that could change global health and development, but instead we award IP monopolies, which results in medicines of therapeutic value, for the very few who can afford them. And don't get me started on the profits made by IP rights holders...

So, we'll reverse Brexit; we'll return responsibility for medicines R&D and manufacturing to the state health system; and concentrate our scientific energy on the development of medicines that are both needed and affordable and where IP rights don't hinder access to medicines. Simple!

Want to find out more about Tim? Take a look at our [staff site](#)!