

**MANAGEMENT SCIENCES FOR HEALTH
SEAM 2001 CONFERENCE: TARGETING IMPROVED ACCESS
TAPE NO. 10 – NOVEMBER 27, 2001**

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Next Steps and Closing Remarks

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First of all, I'd like to say if I'd known Ron [O'Connor] was so easily impressed by a suit, I'd probably wear one more often. Always good to impress the boss. As you can imagine, in the SEAM [Strategies for Enhancing Access to Medicines] Program, we see a whole lot of work ahead of us, and a lot of it is concentrated in the next couple of months. First and foremost on our plate is figuring out what to do about country programs. We have six potential countries. I think all of these country programs could potentially improve access in the countries and have an impact. All of them pose significant implementation challenges. There is, I gather, a rumor floating around that decisions have already been made. I can tell you for sure that's not true because I haven't heard about it and I plan to be a part of any decision that gets made.

We are going to be discussing selection criteria with our advisory panel on Friday. Then over the next couple of weeks to a month, we're going to be making our selection, primarily internally, but certainly consulting with the Bill & Melinda Gates Foundation to make sure they at least give no objection to what we have in mind. After that, we will be visiting each of the countries that we've been working with. In the countries that appear

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to be the best bet for the use of these funds, we'll be trying to nail down agreements and actually get moving. In the countries that don't seem to offer the best bang for the buck, if you will, we're going to be trying to help the country identify other ways to get these interventions supported because, as I said, every one of these programs is a reasonable idea. So just because we may not be working on them with SEAM doesn't mean they won't go forward. If there's anything we can do to help, we'll try to make sure that every one of these things goes forward.

Now we have a lot of other things to do. We've got to, as Jono [Jonathan Quick] mentioned, push forward with cleaning up the assessment framework, refining the indicators. In the countries where we will be working long-term, we're going to have to do another access survey, a more targeted access survey, to make sure that we're measuring baselines against which we'll be measuring impact in those countries. Hopefully, we'll be learning some lessons from the first time around. I'm sure we will.

But that's not all. We've got to complete and deploy a drug management software suite not only in SEAM countries but also in all the countries that have been using such software for the last several years, and then make it available to other countries. We've got to get right on the ball investigating mobile communications tools because they're going to be needed. Those are going to be critical tools for communications and supply chain management, we think. We have a full plate of technical collaboration under way

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and planned with Stop TB, Roll Back Malaria, and the Green Light Committee, potentially with the Global Fund to Fight AIDS, Tuberculosis and Malaria coming on board, all of which will be, we hope, done in collaboration with EDM [Essential Drugs and Medicines Policy] and other folks at WHO [World Health Organization].

I'll say with respect to franchising, the question about attracting capital is still an open question, but we're hoping that Kenya will be able to attract some capital to a public health franchise. That looks like it will work. Assuming it does, we're going to be working with Cry for the World [now Sustainable Healthcare Enterprise Foundation] to expand and roll out the franchise in Kenya. All that's not to mention we've got an equally full plate of activities under the RPM Plus [Rational Pharmaceutical Management Plus] Program, which is just as big as SEAM, is just as complicated, has just as many activities. There's also a number of other targeted, so-called targeted pieces of work at country level coming on that have nothing to do with SEAM or RPM Plus.

As we've been saying to everybody, we'll do it in January. Of course, January is right around the corner now, and January is looking pretty full. So we have a lot of work to do. But as we reflect on President Arias's remarks this morning, I think we realize this burden is not really very heavy. In fact, it's a great opportunity to do things that make a difference, that can really make access more real in countries where it's a significant problem. I'd like to say that as we continue with this work, we'll certainly be aided by the

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deliberations and the insights coming out of this conference. I've been with MSH full-time now for 12 years, and I can say without question this is the best conference I've ever been associated with.

One reason certainly is that this is perhaps an unparalleled or certainly rare assemblage of expertise in development and drug management. You've maintained enthusiasm, interest, and dedication through some very long and, shall we say, rich and intense sessions. We hope that we're going to be able to continue to draw on your interest and expertise as SEAM rolls along. However, the other factor in making this happen and making it a great conference is the people who actually made it happen. If you look in the back of the room, you will see the group of people who are really responsible. I'm just going to name them. First of all, Keith Johnson really is responsible for putting this whole thing together. Keith spent some 20 years organizing conferences for USP [United States Pharmacopeia], and I know he thought he was probably laying down that kind of burden when he came over to MSH, but he didn't. He wasn't here long before he was stuck with another big one. Jane Andelman most of you have had some contact with; she organized the travel and logistics. Gretchen Hurley, our External Relations Coordinator, did—I mean, I say Keith was responsible for organizing it; I think Keith would say Gretchen did a lot of the actual organizational work in making it happen. Jennifer Jones managed the finances. Those of you who are getting some expense money, you can thank her for making it happen. John Vivalo, Tianna Sherman, and Arin Speed are Senior Program

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Assistants who have been working pretty close to seven days a week for the last month if not two or three months to get this thing organized. Julie McFadyen, Conrad Fleming, and Crispin Vincent organized the communication system. In spite of the little problem Jono [Jonathan Quick] had with his computer, I think that we'd agree that the technology has worked pretty well. Finally, other key conference staff, a lot of whom you've seen running around with the Secret Service headpieces on—Wendy Osborne, Samantha Hubbard, Jenny Jackson, Kindra Marshall, Mandi Mayer, Alan Rogosch, Alix Regalia, Fiona Abolade, Marie-Louise Diomi, Glenn Davis—all have been around every day before we got here and will be after we leave making this thing happen and keeping people moving. The gentleman who is going to make all of you famous with his videotaping, Luc-Bernard Val. Finally, we want to thank the Marriott and Georgetown University Conference Center staff who have been real helpful and responsive. When we had to postpone this meeting, we weren't sure if we were really doing the right thing. I think in retrospect we're real glad that we moved here because I don't see how we could have had a better venue than this.

As we move forward, we absolutely welcome ongoing participation, ideas, suggestions, and further contacts. I've been asked to remind everyone that the SEAM Web site is going to be an important source of information as we go along. It's at www.msh.org/projects/seam. For one thing, Dr. Arias's presentation, his speech, will be on the Web site, as will all the things we're doing in SEAM, all the information.

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Everything will be there on the Web site. But again, we really want to thank everyone for being here, for the participation and the perseverance. I haven't been in too many conferences where the room's still full after a three-day meeting. So I want to thank you.