

GHTC's G20 Priorities

The Indian government has taken a novel approach to the G20 presidency this year, focusing on new topics and innovative models to mold the future of the global health architecture. Their agenda, which focuses on building a new medical countermeasures platform to coordinate the research and development (R&D) and equitable delivery of new tools for future pandemics, universal health coverage (UHC), and the future of the global health security architecture, has rightfully highlighted the importance of innovation to tackling all three themes.

The world remains dangerously unprepared to prevent and respond to emerging diseases and global health threats—a risky political choice. G20 leaders must take action and seize opportunities to ensure every country and community has the tools they need to address poverty-related and neglected diseases (PRNDs) as part of UHC and create a pandemic-proof future. This means investing in both new and existing mechanisms that facilitate and enable the development of new health technologies and strengthening the R&D ecosystem globally to create a more fit-for-purpose global health architecture with equity and human rights at its core.

The Global Health Technologies Coalition (GHTC) would like to elevate the following priorities under the three health themes being advanced by the G20 this year:

Theme 1: Support and develop new mechanisms to strengthen and finance R&D for medical countermeasures.

Commit to a new approach for a future pandemic countermeasures platform.

With India's leadership to develop a more permanent reimagined global institutional platform for the development of medical countermeasures, building on lessons learned from the Access to COVID-19 Tools Accelerator, G20 leaders must ensure that any new mechanism has a clear mandate, ability, and accountability to develop, manufacture, and distribute vaccines, medicines, and diagnostic tests for the targeted disease, based on the needs of all countries and vulnerable populations.

- A new framework and platform should be responsive to local and regional needs, with an end-to-end approach that addresses the needs of low- and middle-income countries (LMICs). It is essential that such a platform engage stakeholders early in the R&D process, involving researchers, manufacturers, affected communities, and civil society from the start.
- Ensure ready-to-use clinical trial protocols in the public interest and increase vaccine, diagnostic, treatment, and other health technology manufacturing support for regionally distributed companies.
- Regional R&D hubs should be supported to strengthen capacity and generate new technologies between health emergencies, ensuring capabilities that meet public health needs for all.
- A new pandemic countermeasures platform, which focuses on diagnostics, therapeutics, and vaccines for both priority pathogens and poverty-related and neglected diseases, should also prioritize oxygen, building on lessons learned by the Oxygen Emergency

Taskforce and advance sustainable funding plans, such as the Global Public Investment model, to end the overreliance on funding from high-income countries or private capital.

Fully fund the Pandemic Fund for year one and commit to a sustainable capitalization plan for the ensuing years.

To date, the Pandemic Fund has secured only US\$1.6 billion in pledges against the US\$10.5 billion agreed annual target for additional international financing to close critical global preparedness gaps. The Fund should include opportunities to support countries and regions in strengthening laboratory, clinical research, and regulatory capacity in support of the development of and access to biomedical countermeasures, including diagnostics, therapeutics, and vaccines.

Leaders must ensure the activities of the Pandemic Fund are complementary to those of other organizations and initiatives to create a strengthened, more cohesive global health architecture.

Theme 2: Resilient, equitable, and sustainable Universal Health Coverage

Increase investment in R&D for poverty-related and neglected diseases.

Global progress continues to be threatened as resources to address ongoing PRNDs have been reallocated to the COVID-19 response. It is vital to advance funding for R&D to address diseases like tuberculosis, malaria, HIV/AIDS, and neglected tropical diseases, as well as platform technologies to ensure a robust pipeline of new tools, including vaccines, diagnostics, therapeutics, vector control products, and other health technologies.

- Support product development partnerships, which have been a key instrument in the fight against PRNDs, and make further investments in this essential component of the global health architecture. This is particularly critical to ensure that products are developed and distributed with an equity lens, with the end user in mind, and with characteristics, including affordability, acceptability, and ease of administration, that facilitate their uptake and delivery.
- Create incentives for the timely licensure of new innovations and commit resources toward subsidizing novel approaches and helping new access-focused initiatives weather rough patches and high start-up costs.

Ensure that the specific R&D needs of women, children, and other vulnerable populations are addressed.

The COVID-19 pandemic has exacerbated gender-related structural inequalities and barriers in women's health care access—a phenomenon similarly observed in past economic and health crises. The same can be said of pediatrics and other vulnerable or neglected populations. Yet long-term, intersectoral, and structural reforms are given low priority.

- We encourage governments to call on health researchers to routinely embed sex- and gender-based perspectives into R&D so that unmet needs in women's health are addressed and innovations are advanced. This includes:
 - Ensuring governments have policies in place to enable the collection and analysis of sex- and gender-disaggregated data.
 - Work with the World Health Organization (WHO) on the development of specific target product profiles for health technologies that address the needs of vulnerable populations, as WHO can play a major role in guiding product developers and providing technical support to countries to facilitate equitable distribution and uptake of new tools. Leaders must support R&D to fill technology gaps for children, pregnant people, and other at-risk populations.
 - Advocate for changes in product development that promote the safe inclusion of pregnant women into clinical studies, with the aim of generating data to support earlier access to innovative medicines for this population.
 - Work with respective regulatory agencies to draft and implement guidance to ensure adequate representation of women and other underrepresented populations in clinical trials, including during pregnancy and lactation.

Reprioritizing antimicrobial resistance (AMR) and a One Health approach as part of G20 global health strategies.

Leader must invest in new tools and technologies to fight the rising threat of the silent pandemic develop and operationalize national action plans.

- Invest in R&D to develop quality-assured, new, and improved antimicrobials, novel compounds, diagnostics, vaccines, and other health technologies to fight the development of drug-resistant bacterial, viral, parasitic, and fungal microorganisms. There are few new antimicrobials in clinical development and waning private investment, and we must take urgent action to support the fragile antimicrobial pipeline.
- Support development of rapid point-of-care testing devices that bring the full spectrum of essential diagnostics closer to where people live and work. Improved access to affordable, point-of-care tests will ensure data on priority diseases and AMR, and their spread is generated in all countries and regions of the world.
- Ensure a sustainable market for antibiotics by developing research incentives to develop new antimicrobial drugs, accelerating access to new antimicrobials against drug-resistant infections, increasing vaccine use to reduce risk of infections, promoting availability of a diversified drug portfolio in countries to reduce pressure on existing drugs and risk of development of AMR.
- Provide ongoing support to the Global AMR R&D Hub in its work providing countries and investors with the latest AMR R&D landscape analysis, which helps address gaps in the market. The Hub should also pave the way for efficient deployment of tailor-made incentives for R&D and facilitate global discussion on priorities and opportunities for increasing investments in R&D.

Theme 3: Integrate R&D in the global health security architecture

Integrate R&D into pandemic prevention, preparedness, and response mechanisms and governance structures.

While COVID-19 has pushed pandemic R&D into the spotlight, a global framework or process to assess country or global R&D readiness for pandemic threats is not included in the tools we currently have to govern and coordinate global health security. R&D must be a central pillar in the new global health architecture that is being developed.

- Push for more holistic approach to governance for R&D of medical countermeasures as part of the pandemic accord. The current zero draft published by the Intergovernmental Negotiating Body bureau still largely emphasizes downstream response measures such as manufacturing and registration. While these are critical elements to a country's global health security, they are not sufficient to ensure the end-to-end approach—from early-stage discovery research to clinical development to access and delivery of health tools post-registration—that is needed.
- Leverage existing external assessments, such as the Global Health Security Index, the Joint External Evaluations, and other platforms like the Global Health Security Agenda to assist in decision-making by helping to identify gaps and health security threats.
- The Working Group on Strengthening WHO Preparedness and Response to Health Emergencies is reviewing the IHR, and countries should push for targeted amendments, which could include adding specific guidance language on R&D coordination, genetic sequence sharing, and using WHO as a convener for global research experts to share knowledge via the R&D Blueprint. R&D indicators should also be formally incorporated into the IHR and the Joint External Evaluations.