Preface

We embarked on this study of US pharmaceutical donations in response to a request for proposals issued in December 1996 by a group of pharmaceutical firms and private voluntary organizations (PVOs). The study was initiated specifically to collect basic data on US pharmaceutical donations, to inform the public policy debate over drug donations, and to provide input into the review and evaluation of the WHO *Guidelines on Drug Donations.* The overall objective was to help improve the effectiveness of drug donations by identifying ways to enhance the positive impacts and reduce the negative impacts.

Although this study was sponsored by a group of pharmaceutical firms and PVOs, called the Partnership for Quality Medical Donations, we made multiple efforts to avoid its becoming a "typical industry-study." With the agreement of the sponsors, the research was carried out independently. We sought to present both the positive and negative effects of pharmaceutical donations in as balanced a manner as possible. We also sought, in our presentation of study methods, to identify possible sources of bias, and efforts were made to minimize the possibility of influence by the study's sponsors. All these measures notwithstanding, it is likely that both critics and supporters of donations will find fault with our study and allege the existence of bias. We ask only that readers keep an open mind, with both the positive and the negative aspects in view, as they read through this volume.

Navigating the controversies around pharmaceutical donations is not easy. Drug donations have the potential to meet important human needs and to improve human welfare, especially among the poor. At the same time, they have the potential to create confusion and waste, and they can impose substantial costs on recipients. Increasing the positive impacts of drug donations requires communication and negotiation among donors and recipients, so that the supplies from donors have a better chance of meeting the needs of recipients. This is not a simple process, for donations flow across several layers of organizations, over language and cultural barriers, and through differentials of power and poverty. We have

attempted to identify some of these issues in our analysis of the players, the processes, and the products of pharmaceutical donations.

This study is intended to provide only one piece of the analysis needed on pharmaceutical donations. We did not begin with a preconceived set of answers, nor did we end up with a single answer or simple answers to the problems identified. Instead, we sought to provide some baseline data, to propose some methods of evaluation, and to identify actions to improve the processes of donations. The study raised a number of questions that are not answered adequately in the pages that follow. Also, some practices, such as government donations of drugs and European donations of drugs collected from pharmacies and patients, were not addressed at all.

This report is organized into two main sections. The first provides four analytic chapters, while the second provides three field studies. Chapter 1 introduces the issues of pharmaceutical donations and gives a summary of this report's methods and main findings. Chapter 2, by Anita Wagner and Frank Massaro, presents a method for classifying drug donations by essential drug status and therapeutic class, and it analyzes data on donations for our three field countries. Chapter 3, by Thomas McLaughlin and Xiaoming Gao, analyses a data set of drug donations shipped by two US PVOs over a three-year period, with attention to issues of relevance and time to expiration. In Chapter 4, Lisa Bates examines the written donation policies of both pharmaceutical companies and PVOs. In Chapters 5 and 6, Karin Dumbaugh reports on the field studies she conducted on drug donations in Armenia and Tanzania; in Chapter 7, Michèle Derai-Cochin reports on the field study she carried out in Haiti.

Conducting this study on pharmaceutical donations required the assistance of many individuals, and I would like to acknowledge their contributions. First were the core members of the study team, who worked long hours over many weekends and nights with extraordinary commitment: Tom McLaughlin, Michèle Derai-Cochin, and Karin Dumbaugh. One team member, Anita Wagner, was especially helpful in commenting on many of the chapters in several drafts. Frank Massaro provided invaluable input into the classification study, and Amanda Giordano patiently helped with the categorization of donated drugs. Xiaoming Gao greatly helped with analyses of the quantitative data. The three field studies were carried out with the cooperation and support of many parties who provided data and background information as well as practical travel advice. The case studies could not have been prepared without assistance from administrators in hospitals and clinics, government officials, private vol-

untary organizations, pharmaceutical manufacturers, pharmacists, and various international and bilateral aid agencies. Special appreciation goes to Dr. Henri Menager for his assistance in Haiti.

The study team was assisted at the Harvard School of Public Health by Vanessa Bingham, who carried out the logistical and manuscript tasks associated with the project. Karin Dumbaugh managed the project in its first phase, and Martha Zeagler coordinated the final phase, especially the production of the report. Scott Gordon provided editorial assistance and research assistance. Eugene Bailey carefully edited the full report, giving the manuscript some grace and consistency. Marc Kaufman of Desktop Publishing & Design Co. handled the report's production with expertise and admirable speed. We appreciate the cooperation we received from the World Health Organization's Drug Action Program. We thank Richard Laing, Alexander Walker, Adetokunbo Lucas, members of the WHO, and members of the sponsors group for their thoughtful comments on an earlier draft of the report. Although we answered the questions these reviewers raised as best we could, the full responsibility for the research presented here, with its remaining flaws, resides with us.

The study team also appreciates the financial support provided by the study's sponsors, the Partnership for Quality Medical Donations, a consortium of pharmaceutical firms and private voluntary organizations. We appreciate the willingness of the sponsors to allow us to carry out this study independently, and to present the complexities of the pharmaceutical donation process. We sought to present these complexities fully and honestly.

As with all substantial research projects, this report encroached on our lives in palpable ways. I hope that our efforts will contribute to a better understanding of the benefits and problems of pharmaceutical donations and will help to enhance their positive impacts.

Michael R. Reich
Harvard School of Public Health
Boston, Massachusetts
November 6, 1998