



**Health Action International Asia Pacific (HAIAP)**  
(in collaboration with USM TWN DMDC IIUM)



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# 1. News from HAIAP

## 1.1 HAIAP 43rd Birthday May 29

HAI was formally founded at the International NGO Seminar on Pharmaceuticals organised by IOCU (now Consumers International), Buko Pharma and Social Audit in Geneva from 27-29 May 1981. The IOCU Regional Office for Asia and the Pacific (ROAP) in Penang agreed to be the clearing house for HAI.

Following the recommendation of Dato Anwar Fazal, Director of IOCU ROAP 1975 – 1991, and Dr Prem Chandran John, co-coordinator of Asian Community Health Action Network (ACHAN), a planning meeting in Penang, Malaysia, in 1986 set up ARDA - Action for Rational Drugs in Asia. IOCU ROAP and ACHAN would coordinate the network in Penang. It was loosely called the ARDA network. The All India Drug Action Network (AIDAN) founded and coordinated by Dr Mira Shiva was an important partner. Other network partners were identified and brought in - together with the Poisons Centre at the Science University of Malaysia (USM). That body became a WHO collaboration centre. In Penang there was a close association between the ARDA network and the medical faculty under USM Vice Chancellor Dzulkifli Abdul Razak (Dzul).

At the end of the 34th World Health Assembly in Geneva, representatives of NGOs from 26 countries formed Health Action International, an 'International Antibody' to resist 'Ill-treatment of Consumers by Multinational Drug Companies'.

Following the recommendation of Dato Anwar Fazal, Director of IOCU ROAP 1975 – 1991, and Dr Prem Chandran John, co-coordinator of Asian Community Health Action Network (ACHAN), a planning meeting in Penang, Malaysia, in 1986 set up ARDA - Action for Rational Drugs in Asia. IOCU ROAP and ACHAN would coordinate the network in Penang. It was loosely called the ARDA network. The All India Drug Action Network (AIDAN) founded and coordinated by Dr Mira Shiva was an important partner. Other network partners were identified and brought in - together with the Poisons Centre at the Science University of Malaysia (USM). That body became a WHO collaboration centre. In Penang there was a close association between the ARDA network and the medical faculty under USM Vice Chancellor Dzulkifli Abdul Razak (Dzul).

HAI had a coordinating office in Europe. It made its presence felt in the World Health Assembly in the following year, where a strong resolution on the Essential Drugs Programme was adopted. The greatest credit paid to HAI came from one of the industry critics, who said that HAI 'has shown a genius for winning the minds of elite decision-makers from Bangladesh to Sweden.' Campaigns in Sri Lanka and Bangladesh showed how important this new global civil society force was. We could fight back and set the agenda! HAI's work was linked with 'Consumer Interpol' - another direct action information/ investigative framework, which was initiated out of IOCU in Penang.

by 2001 HAI had grown and grown, and eventually grew out of the bosom of IOCU/CI, which had so strategically hosted and facilitated HAI's work for many years. In that year (2001) ARDA decided at a meeting held on 18-22 February to relocate out of CIROAP and to set up as an independent NGO - then based in Colombo, Sri Lanka. For uniformity with the other three HAI centres (Europe, Latin America and Africa), **the Asia-Pacific office was registered as HAIAP, with a Governing Council and based in Colombo.** HAIAP would continue campaigning on rational medicines use and economic matters and take up new issues in the areas of poverty and health and traditional medicines.

HAIAP moved back to Penang in 2011. To read about the history in more detail, look at **HAIAP at 40:** <https://www.twn.my/title2/books/pdf/HAIAP%20at%2040.pdf>

## 1.2 Anwar's Aphorisms

From our dear founder and friend Dato Anwar Fazal - a collection of aphorisms based on the ABC Trilogy: At all times, human rights activists must be Angry, Brave and Creative. Claudio Schuftan has shared them as a 'Reader' primarily for enlightenment about activism to celebrate HAIAP's birthday. Read them here:

<https://claudioschuftan.com/327-the-abc-trilogy-at-all-times-human-rights-activists-must-be-angry-brave-and-creative/>

## 1.3 Olle Hansson Day

Dr Olle Hansson Day is celebrated on May 23rd. It is also celebrated it as Anti Hazardous Drugs Day in India.

Olle Hansson was an icon of the activist medical profession and wrote a classic in medical investigative exposure. The book was called 'INSIDE CIBA GEIGY' and published in Penang, Malaysia in 1989. It is an amazing piece and we share the foreword written by **Anwar Fazal**, former President of International Organisation of Consumers Union (IOCU), co-founder of Health Action International (HAI) and the instigator for the idea of a People Health Assembly.

*'Olle was a very special inspiration to us. His courage, his competence, his commitment were rare in a profession that is more often too comfortable or too implicated to speak out against a powerful industry.'*

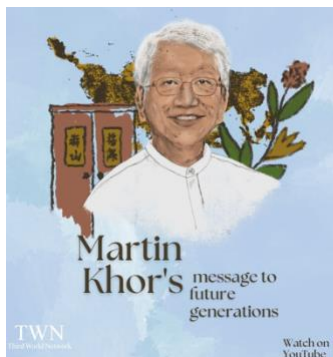
*His passing on 23 May 1985 was mourned not by words but by a series of actions that will continue to inspire those working to see a more responsible pharmaceutical industry worldwide.*

*Dr Olle Hansson meant a lot to all of us and his fight and grit inspired us. There are very few of us left who knew him personally and relate to him and his Contribution. His Legacy is very important for the Rational Drug Movement as well as HAIAP. It is important to remember him and what he stood for.*

Please go to <https://www.haiasiapacific.org/dr-olle-hansson-day-may-23/> for a story of his life and his book *Inside Ciba-Geigy*.

## 1.4 More Important anniversaries

### 1.4.1 Vale Martin Khor



Over four years have gone by since his passing on April 1st 2020. Yet Martin's essence lingers as the very fabric of the Third World Network, and of HAIAP, woven into our soul, a testament to his enduring legacy.

Martin Khor was more than a visionary leader, he was a symbol of love – love for humanity, for the planet, and for the imperative of action. As we honour his memory, let us carry forward his spirit of resilience and determination, knowing that in doing so, we honour not only his legacy, but the collective journey towards a world of equity and justice for all.

We are deeply grateful to Tom Kruse, a dear friend, who spent a week in deep conversation with Martin in Penang, enriching us all with this precious legacy.

We reflect upon excerpts from Martin's final interviews

#### Martin Khor on

##### .....finding Happiness

[https://www.youtube.com/watch?v=lvdUZ88ae5Q&list=PLv1SgWOS\\_G4uY7FIW-KncwPo8\\_gmTVMH5&index=1](https://www.youtube.com/watch?v=lvdUZ88ae5Q&list=PLv1SgWOS_G4uY7FIW-KncwPo8_gmTVMH5&index=1)

##### ..... hyperglobalisation

[https://www.youtube.com/watch?v=3waWs1ihJcY&list=PLv1SgWOS\\_G4uY7FIW-KncwPo8\\_gmTVMH5&index=2](https://www.youtube.com/watch?v=3waWs1ihJcY&list=PLv1SgWOS_G4uY7FIW-KncwPo8_gmTVMH5&index=2)

##### ..... lessons not learnt

[https://www.youtube.com/watch?v=\\_1R-0X2L2a0&list=PLv1SgWOS\\_G4uY7FIW-KncwPo8\\_gmTVMH5&index=3](https://www.youtube.com/watch?v=_1R-0X2L2a0&list=PLv1SgWOS_G4uY7FIW-KncwPo8_gmTVMH5&index=3)

##### .....global cooperation and ecology

[https://www.youtube.com/watch?v=zWHmrTenol8&list=PLv1SgWOS\\_G4uY7FIW-KncwPo8\\_gmTVMH5&index=4](https://www.youtube.com/watch?v=zWHmrTenol8&list=PLv1SgWOS_G4uY7FIW-KncwPo8_gmTVMH5&index=4)

##### .....the distorted world trading system

[https://www.youtube.com/watch?v=fTVynXL7LQk&list=PLv1SgWOS\\_G4uY7FIW-KncwPo8\\_gmTVMH5&index=5](https://www.youtube.com/watch?v=fTVynXL7LQk&list=PLv1SgWOS_G4uY7FIW-KncwPo8_gmTVMH5&index=5)

##### .....the link between peace, global cooperation and prosperity

[https://www.youtube.com/watch?v=eJFoe7InyKs&list=PLv1SgWOS\\_G4uY7FIW-KncwPo8\\_gmTVMH5&index=6](https://www.youtube.com/watch?v=eJFoe7InyKs&list=PLv1SgWOS_G4uY7FIW-KncwPo8_gmTVMH5&index=6)

See also <https://martinkhor.org/> and the video prepared by Yap Beow Keat for Martin's Olle Hansson Award:

<https://tinyurl.com/5ywx75u>

## 1.4.2 TWN 40th Anniversary

This year is the 40th anniversary of the very organisation Martin Khor helped to build - our partner organisation - The Third World Network - that was conceived after a 1984 international conference hosted by its parent organization, the Consumers' Association of Penang. That conference gathered representatives from 20 countries from the Global South. At the time, the term Third World was used to convey the shared images between countries of nonwhiteness and inheritance of colonial economic models and their consequential dependence. Martin and his friends saw at this time the need to strengthen South-South cooperation and push for a Southern perspective on development.

## 1.5 AMR activities in Thailand



Niyada Kiatying Angsulee has reported that on May 30 their group had a press conference concerning the antibiotic residue in pork meat that was revealed in a survey conducted by CSOs.

The group is also working on a new proposal in partnership with the University of Glasgow to investigate the impact of AMR from aquaculture in Thailand.

## 1.6 Reminder- HAIAP website

<https://www.haiasiapacific.org>

The HAIAP website is intended as a source of information about our history, interests, battles and activities, and includes all issues of our publications, eg HAIAP News and monthly Bulletins as well as records of major events. It is also a 'library' of significant useful publications from all sorts of sources.

Clearly the website must be more user friendly and we will work on that.

Also it must be more **visible**.

**We are asking our colleagues to visit the website and have a good look around.** We have some ideas how to make it tidier and more user friendly (and we are getting onto that) but we would very much appreciate your ideas too.

Also, if you are involved with other organisations please could you get a link to HAIAP included on their site if possible.

**Health Action International Asia Pacific (HAIAP)** <https://www.haiasiapacific.org>

Let's see if we can become more visible and useful.

## 2. Information sharing

### 2.1 Rich countries refuse to share vaccines, medicines and diagnostics for health emergencies

Please read the whole article here <https://twm.my/title2/health.info/2024/hi240515.htm>

Geneva, 25 May (Sangeeta Shashikant) – Developed countries rejected proposals to meaningfully share vaccines, medicines, and diagnostics to prevent health emergencies, during discussions on the Pathogen Access and Benefit-Sharing (PABS System). This stance has not gone down well with developing countries, which had hoped for concrete deliverables on equity to deal with health emergencies in the WHO negotiations on a pandemic agreement.

Rich countries' persistent refusal to commit to provide certainty of access during health emergencies brought negotiations on the PABS system to an abrupt halt. Cautious optimism on concluding the Pandemic Agreement, turned into pessimism.

TWN and 160 other Civil Society groups expressed concerns over the Pandemic Agreement negotiation process in an open letter to the WHO DG. The letter criticises the draft Pandemic Agreement for perpetuating inequities and failing to provide concrete measures for pandemic prevention, preparedness, and response (PPPR). Key issues highlighted include the lack of mechanisms for financial support and technology transfer to developing countries, and the imposition of burdensome surveillance obligations without corresponding commitments from developed countries. The letter began...

*We, the undersigned civil society organizations, are reaching out to you to underscore our grave concerns regarding the negotiation process of the Intergovernmental Negotiating Body (INB) for the Pandemic Agreement.<sup>1</sup>*

As of May 25, member states of the Intergovernmental Negotiating Board, assembled in Geneva, had stopped negotiating over the draft text, and were instead talking about the way forward. And on that, as well, there was no accord, leaving a future pathway in the hands of the 77th World Health Assembly May 27 - June 1 2024.

### 2.2 77th World Health Assembly (WHA 77) May 27 - June 1 2024

<https://www.who.int/about/accountability/governance/world-health-assembly>

The World Health Assembly is the main decision-making body of WHO and is comprised of 194 Member States. Every year, generally in May, delegates from all Member States come together to agree on the Organization's priorities and policies

At the Health Assembly, country delegates make decisions on health goals and strategies that will guide their own public health work and the work of the WHO Secretariat to move the world towards better health and well-being for all. The Health Assembly also serves as a forum for reporting back on the implementation of the areas of work set, in order to determine what has been achieved and decide on strategies for addressing the gaps.

Documentation of WHO for Executive Board sessions and Health Assemblies

<https://apps.who.int/gb/index.html>

#### **WHO: Drafting group starts negotiations on IHR amendments**

Geneva, 30 May (TWN) – A drafting group of the ongoing World Health Assembly (WHA) started negotiations on the pending amendment proposals to the International Health Regulations (IHR) 2005.

The drafting is largely focused on Article 13 on equitable access to relevant health products, Article 44 on collaboration, assistance and financing, and Article 54 on a committee for the effective implementation of IHR 2005.

Please see details here: <https://www.twm.my/title2/health.info/2024/hi240518.htm>

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<sup>1</sup> [https://www.twm.my/announcement/20240428\\_Open-Letter-to-the-Director-General-of-the-World-Health-Organization\\_FINAL.pdf](https://www.twm.my/announcement/20240428_Open-Letter-to-the-Director-General-of-the-World-Health-Organization_FINAL.pdf)

## 2.3 Expanded Programme on Immunisation (EPI) 50 years

Meru Sheel and Alexandra Hogan

Please read the whole article here: <https://tinyurl.com/3tcr3nwx>

In 1974 the World Health Assembly launched the [Expanded Programme on Immunization](#)<sup>2</sup> with the goal to vaccinate all children against diphtheria, tetanus, pertussis (whooping cough), measles, polio, tuberculosis and smallpox by 1990. The program was subsequently expanded to include several other diseases.

The modelling, marking 50 years since this program was established, shows a child aged under ten has about a 40% greater chance of living until their next birthday, compared to if we didn't have vaccines. And these positive effects can be seen well into adult life. A 50-year-old has a 16% greater chance of celebrating their next birthday thanks to vaccines.

The researchers developed [mathematical and statistical models](#)<sup>3</sup> which took in vaccine coverage data and population numbers from 194 countries for the years 1974–2024. The models were used to simulate how diseases would have spread from 1974 to now, as vaccines were introduced, for each country and age group, incorporating data on increasing vaccine coverage over time.

### Children are the greatest beneficiaries of vaccines

Since 1974, the rates of deaths in children before their first birthday has more than halved. The researchers calculated almost 40% of this reduction is due to vaccines.

The effects have been greatest for children born in the 1980s because of the intensive efforts made globally to reduce the burden of diseases like measles, polio and whooping cough.

Some 60% of the 154 million lives saved would have been lives lost to measles. This is likely due to its ability to spread rapidly. One person with measles can spread the infection to [12–18 people](#).<sup>4</sup>

### Continued vaccine success is not assured

Low or declining vaccine coverage can lead to epidemics which can devastate communities and overwhelm health systems.

Notably, the COVID pandemic saw an overall decline in [measles vaccine coverage](#),<sup>5</sup> with 86% of children having received their first dose in 2019 to 83% in 2022. This is concerning because very high levels of vaccination coverage ([more than 95%](#))<sup>6</sup> are required to achieve herd immunity against measles.

The results of this research don't tell us the full story about the impact of vaccines. Nonetheless, the results show the success of global vaccination programs over time. If we want to continue to see lives saved, we need to keep investing in vaccination locally, [regionally](#)<sup>7</sup> and globally.

## 2.4 Barbara Mintzes tells us how drug companies in Australia pay doctors over A\$11 million a year for travel and education

Barbara Mintzes and Malcolm Forbes<sup>8</sup>

*The Conversation* May 24, 2024

Please read the full article for all details <https://tinyurl.com/bde9tyd7>

Drug companies are paying Australian doctors millions of dollars a year to fly to international conferences and meetings, give talks to other doctors, and to serve on advisory boards, our research shows.

Our team [analysed](#)<sup>9</sup> reports from major drug companies, in the first comprehensive analysis of its kind. We found drug companies paid more than A\$33 million to doctors in the three years from late 2019 to late 2022 for these consultancies and expenses.

We know this underestimates how much drug companies pay doctors as it leaves out the [most common gift](#)<sup>10</sup> – food and drink – which drug companies in Australia do not declare.

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<sup>2</sup> <https://iris.who.int/handle/10665/92778>

<sup>3</sup> <https://theconversation.com/how-to-model-a-pandemic-134187>

<sup>4</sup> [https://www.thelancet.com/journals/laninf/article/PIIS1473-3099\(17\)30307-9/abstract](https://www.thelancet.com/journals/laninf/article/PIIS1473-3099(17)30307-9/abstract)

<sup>5</sup> <https://www.who.int/news/item/18-07-2023-childhood-immunization-begins-recovery-after-covid-19-backslide>

<sup>6</sup> <https://www.who.int/publications/i/item/who-wer9217-205-227>

<sup>7</sup> <https://regionalimmunisationalliance.org.au/>

<sup>8</sup> Professor, School of Pharmacy and Charles Perkins Centre, University of Sydney Consultant psychiatrist and PhD candidate, Deakin University

<sup>9</sup> <https://www.mja.com.au/journal/2024/220/8/pharmaceutical-company-payments-australian-doctors-reported-medicines-australia>

<sup>10</sup> <https://pubmed.ncbi.nlm.nih.gov/28667226/>

Due to COVID restrictions, the timescale we looked at included periods where doctors were likely to be travelling less and attending fewer in-person medical conferences. So we suspect current levels of drug company funding to be even higher, especially for travel.....

### **What we found - which specialties received the most?**

We found more than two-thirds of rheumatologists received industry payments. Rheumatologists often prescribe expensive new biologic drugs that suppress the immune system. These drugs are responsible for a substantial proportion<sup>11</sup> of drug costs on the Pharmaceutical Benefits Scheme (PBS).

The specialists who received the most funding as a group were cancer doctors (oncology/haematology specialists). They received over \$6 million in payments.

This is unsurprising given recently approved, expensive new cancer drugs. Some of these drugs are wonderful treatment advances; others<sup>12</sup> offer minimal improvement in survival or quality of life.

A 2023 study<sup>13</sup> found doctors receiving industry payments were more likely to prescribe cancer treatments of low clinical value.

Our analysis found some doctors with many small payments of a few hundred dollars. There were also instances of large individual payments.

### **Why does it matter?**

Doctors usually believe<sup>14</sup> drug company promotion does not affect them. But research tells a different story. Industry payments can affect<sup>15</sup> both doctors' own prescribing decisions and those of their colleagues.....

Overall, a substantial body of research shows<sup>16</sup> industry funding affects prescribing, including<sup>17</sup> for drugs that are not a first choice because of poor effectiveness, safety or cost-effectiveness.

Then there are doctors who act as 'key opinion leaders' for companies. These include paid consultants who give talks to other doctors. An ex-industry employee who recruited doctors for such roles said:<sup>18</sup>

*Key opinion leaders were salespeople for us, and we would routinely measure the return on our investment, by tracking prescriptions before and after their presentations [...] If that speaker didn't make the impact the company was looking for, then you wouldn't invite them back.*

The best available evidence on the effects of pharmaceutical industry funding on prescribing comes from the US government-run program called Open Payments<sup>19</sup>.....

Analysis of this data, which involves hundreds of thousands of doctors, has indisputably shown<sup>20</sup> promotional payments affect prescribing.

### **Medical students need to know about this.**



US research<sup>21</sup> also shows that doctors who had studied at medical schools that banned students receiving payments and gifts from drug companies were less likely to prescribe newer and more expensive drugs with limited evidence of benefit over existing drugs.... So a first step to prevent undue pharmaceutical industry influence on prescribing decisions is to shelter medical students from this influence by having stronger conflict-of-interest policies, such as those mentioned above.

.... Patients trust doctors to choose the best available treatments to meet their health needs, based on scientific evidence of safety and effectiveness. They don't expect marketing to influence that choice.

<sup>11</sup> <https://australianprescriber.tg.org.au/articles/top-10-drugs-2022-23.html>

<sup>12</sup> [https://www.thelancet.com/journals/eclinm/article/PIIS2589-5370\(20\)30369-2/fulltext](https://www.thelancet.com/journals/eclinm/article/PIIS2589-5370(20)30369-2/fulltext)

<sup>13</sup> <https://www.bmj.com/content/383/bmj-2023-075512.abstract>

<sup>14</sup> <https://bmjopen.bmj.com/content/7/9/e016408.long>

<sup>15</sup> <https://pubmed.ncbi.nlm.nih.gov/35992019/>

<sup>16</sup> <https://pubmed.ncbi.nlm.nih.gov/33226858/>

<sup>17</sup> <https://pubmed.ncbi.nlm.nih.gov/30646086/>

<sup>18</sup> <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2432185/>

<sup>19</sup> <https://openpaymentsdata.cms.gov/>

<sup>20</sup> <https://pubmed.ncbi.nlm.nih.gov/33226858/>

<sup>21</sup> <https://www.bmj.com/content/346/bmj.f264.long>