Indiana University Strategy for Global Access to Health

“Indiana University seeks . . . to offer leadership in creative solutions for 21st century problems.” (From the Indiana University Mission Statement)

Ten million people die every year due to lack of access to existing medications. While the scope of improving access to global health care is much larger than IU or any organization can effectively address on its own, universities, including IU, are uniquely poised to offer innovative solutions to this 21st century problem. University research plays an increasingly important role in the drug development pipeline; according to a 2000 Senate Report, 15 of the 21 drugs of greatest therapeutic impact were derived from federally funded projects at academic centers. Indiana University already has a history of commitment to promoting global health through the IU Kenya Partnership and numerous other programs and areas of research. Indiana University now has the opportunity to be a leader in creating university strategies to address global health by increasing access in the developing world* to the life-saving products of university intellectual property. By creating and implementing new licensing mechanisms to allow access to pharmaceuticals in developing countries, IU can work with other leading academic and research institutions to use the intellectual capital of the world’s universities to help save lives across the globe.

With these considerations in mind, Indiana University makes a commitment to the following:

1. Indiana University will develop and implement licensing mechanisms to increase access to university-developed technologies in developing countries.

   While considering the economics and important health implications of university owned intellectual properties, the university has the opportunity to improve the access of essential medicines and other technologies in developing countries. By working with other universities, IU can be a leader in expanding access through the enhancement of licensing policies with those entities which produce marketable end products. The university will consider multiple approaches, including UAEM’s (Universities Allied for Essential Medicines) Equitable Access License previously implemented by Yale University for the drug stavudine, as a means to increase the downstream accessibility of university-led technologies while maintaining the balance of social and economic benefits.

2. Indiana University will promote increased access to university-developed technologies for the world’s poor throughout the Big Ten, the nation, and the world.

3. Indiana University will advocate for increased federal and private funding for research of ‘neglected diseases.’

4. Indiana University will create benchmarks to measure the social and global uses of its intellectual property.

5. Indiana University will form an ad hoc committee of faculty, administration, representatives of the IURTC, and students to research these issues and propose an implementation model for the university to proceed.
**Initial Signatories:**
- Dr. Kenneth Fife - Professor of Medicine in the Division of Infectious Diseases
- Dr. Margaret Gaffney - Clinical Associate Professor in the Department of Medicine
- Dr. Eric Meslin - Associate Dean for Bioethics and Professor of Medicine, Medical and Molecular Genetics, Public Health and Philosophy
- Fran Quigley - Visiting Professor of Law
- Carrie Rouse - MS4, Co-Coordinator of IU Chapter of Universities Allied for Essential Medicines
- Dr. William Schneider - Professor of History, Baker-Ort Chair of International Healthcare Philanthropy in the Center on Philanthropy at Indiana University, and Director the Medical Humanities
- Dr. Anantha Shekhar - Associate Dean for Translational Research, Raymond E. Houk Professor of Psychiatry, Professor of Pharmacology and Neurobiology
- Matthew Turissini - MS2, Co-Coordinator of IU Chapter of Universities Allied for Essential Medicines

**Endorsed by the IUSM Faculty Steering Committee on 3/17/11**

**Endorsed by Dr. Craig Brater, Dean of IU School of Medicine on 4/14/11**