Critical actions to achieve the value potential of MPTs for prevention of HIV, other STIs, and unintended pregnancies among young women

MPT Workshop Summary

International AIDS Conference 2018
Amsterdam, Netherlands
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Prepared by the Initiative for MPTs (IMPT)
Introduction

The Initiative for MPTs (IMPT) organized a workshop on the premise that the direction, nature, and magnitude of funder investment into the MPT field is central to its success or failure. Co-chairs Gunilla Carlsson (UNAIDS), Elizabeth Bukusi (Kenya Medical Research Institute - KEMRI), and Bethany Young Holt (CAMI Health/IMPT) presented the positive impact potential of MPTs and underscored the urgency of support needed to advance the field. They then facilitated a panel discussion with an esteemed group of sexual and reproductive health (SRH) experts representing a range of international funding agencies, including:

- **Maureen Goodenow**, NIH Office of AIDS Research
- **Onyinye Ndubuisi**, United Nations Development Programme (UNDP), Nigeria
- **David Stanton**, USAID Bureau of Global Health
- **Fulvia Veronese**, NIH, National Institute of Allergy and Infectious Diseases (NIAID), Division of AIDS (DAIDS)
- **Wieneke Vullings**, Dutch Ministry of Foreign Affairs
- **Charlotte Watts**, UK Department for International Development (DFID)
- **Heather Watts**, US Office of the Global AIDS Coordinator (OGAC)

Workshop Objectives and Setting the Stage

This 90-minute workshop aimed to identify priority next steps to ensure sufficient and sustainable funding for the MPT field. Specific workshop objectives included: 1) provide an overview of the status of the MPT field, including critical gaps and opportunities required to advance the field; 2) better understand funder organization positions around MPTs and 3) explore new, innovative opportunities and processes for MPT funding.

MPTs have the potential to improve the SRH of women worldwide. An array of MPTs are in development, including intravaginal rings, fast-dissolving vaginal films, gels, implants, and IUDs. It is critical to tailor products in development to the populations with the highest need and to understand if and how these products will be an efficient use of constrained health resources. Although the MPT field has experienced growth over the past 5 years, current investments, predominantly from the U.S. Government, are not sufficient to ensure the value potential of MPTs. Through technical consultations and Think Tank meetings with partners in HIV & STI prevention and family planning, key technical and market challenges as well as research gaps have been identified and will require strategic funding support to address.

Nearly one decade since the launch of the MPT field, we must focus on opportunities to diversify and optimize funding for appropriate technical and market investments by leveraging existing MPT support and identifying new partnerships. This document aims to provide a brief summary of critical outcomes from the workshop.

Key Points from Panel Discussion

Panelists discussed their organizational positions around the need for MPTs and how the field can achieve adequate financial support, and key points are summarized below.

*The concept of MPTs is important and aligns with panelist organization priorities.*

- NIH Office of AIDS Research supports MPT research in partnership with the NIH Institutes, mainly NIAID, NICHD, and NIMH.
• **UNDP**, in collaboration with other UN agencies and the European Union, recently launched the Spotlight Initiative aimed to eliminate violence against women and girls. MPTs fit within Spotlight’s priorities.
• **USAID** has long supported condom programs and microbicides, was instrumental in the launch of the IMPT and the MPT field, and currently supports MPT clinical and end-user research.
• **NIH, NIAID, Division of AIDS** has prioritized long-acting MPTs that provide contraception and HIV prevention for new R&D and supports understanding the social context of women’s lives to ensure MPT adoption and continued use. MPTs are one of the major scientific priorities to be addressed by applicants to the new HIV Prevention Network to be awarded in 2020.
• The **Dutch Ministry of Foreign Affairs** asserts that every woman should have the ability to make choices around her SRH. The Ministry has long funded female condoms, currently supports the IPM’s MPT intravaginal ring, and has released relevant funding opportunities that did not receive any MPT-focused applications.
• **DFID**’s funding in areas of health and education are linked so as to address underlying issues that impact the wellbeing of target populations. DFID is currently funding the IPM’s intravaginal ring, currently in development for HIV prevention and as an MPT for HIV prevention and contraception.
• **PEPFAR**, which is managed by OGAC, focuses on HIV prevention and recognizes the importance of linkages with SRH, including MPTs.

There are opportunities to better implement lessons learned from condoms, prior microbicide efforts, family planning, and the broader SRH and HIV fields.

• Breakdown of strategic and funding barriers across all fields relevant to MPTs is critical.

The target market for MPTs needs to be better understood.

• Young women and adolescent girls (YWAG) are at highest risk of HIV infection and other sexually transmitted infections, and unintended pregnancies. MPT design and delivery approaches need to be tailored to their realities.
• Women-controlled methods for prevention need more attention. Support for the use of condoms (both male and female) should continue, but women also need to have other MPT options.
• In conjunction with MPT product R&D, it is essential to better understand the complex social context of women’s lives to facilitate appropriate MPT product development and adoption to insure sustained use.

R&D for MPTs and other new technologies is expensive.

• R&D funding needs to support the identification of new active pharmaceutical ingredients and combination drug delivery technologies; highly potent antiretroviral drugs and contraceptive combinations are not yet available as MPTs.
• Innovative funding strategies and funder collaborations will be critical to appropriately support future MPT clinical trials.

There are several concrete ways funding may be better optimized for the MPT field.

• Identification of technical and market research gaps will inform funders of high impact opportunities to support the MPT field, particularly in areas currently without appropriate funding support.
• It is important to assess how investments in new technological approaches can improve the lives of women beyond other health interventions.
• Gaps in financial support to the MPT field need to be better quantified – specifically, a rigorous assessment of the costs needed to fill the technical and market research gaps.
• While R&D funding strategies vary across organizations, given finite resources, it will be important for funders to collaborate and leverage investments in high value MPT product options supported by end-user data.
• Engagement of new funders, such as smaller family foundations and private sector investors, must be explored. As investment decisions are often informed by funder organization business plans, cost-effectiveness and other social return on investment data could be useful.

**Stronger linkages between HIV and SRHR are needed.**

• MPTs present a critical opportunity to reinvigorate efforts to integrate SRHR and HIV. This includes improved linkages with health care delivery settings.

**It is critical to explore existing funder collaborations as models for enhanced MPT funder collaborations.**

• Examples include:
  o The [European & Developing Countries Clinical Trials Partnership (EDCTP)](https://www.edctp.org) was created as a European response to the global health crisis related to poverty-related infectious diseases.
  o The [Global HIV Vaccine Enterprise](https://www.gvve.org) is an alliance of organizations formed to accelerate the search for an HIV vaccine.
  o The [Coalition for Epidemic Preparedness Innovations (CEPI)](https://cepi.net) is an alliance aimed to finance and coordinate the development of new vaccines to prevent and contain infectious disease epidemics.

**Critical Next Steps**

In line with the broader themes of the 2018 International AIDS Conference, if we, as public health leaders, are serious about reducing the risk of HIV infections among those at highest risk, we must do more for women worldwide by addressing their complex SRHR needs and better linking SRHR and HIV prevention methods and approaches. MPTs could be a pivotal tool in this effort, and workshop panelists united in their enthusiasm around the potential impact of these products. For MPTs to reach their full potential, it is critical that we work together to galvanize new support and leverage additional resources for appropriate, high impact MPT investments.

While the workshop illuminated many key points that can help guide the direction of MPT funding moving forward, in light of its short, 90-minute duration, further discussion around concrete next steps is needed. As outlined above, action is required to:

• **Assess lessons learned from across SRHR fields.**
• **Understand the diverse target markets for MPTs.**
• **Identify critical investments and quantify associated funding needs for the field.**
• **Optimize MPT funder collaborations.**
• **Build stronger linkages between HIV and SRHR.**

The IMPT, led by the Secretariat, will continue to facilitate discussion among MPT and other SRHR funders through existing mechanisms such as the MPT Supporting Agency Collaboration Committee (SACC), which has been active since 2014. The IMPT will also continue to engage new potential funders to support the broader MPT field by implementing a comprehensive communications and outreach strategy.

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