

CORRUPTION IN THE PHARMACEUTICALS & HEALTHCARE SECTOR

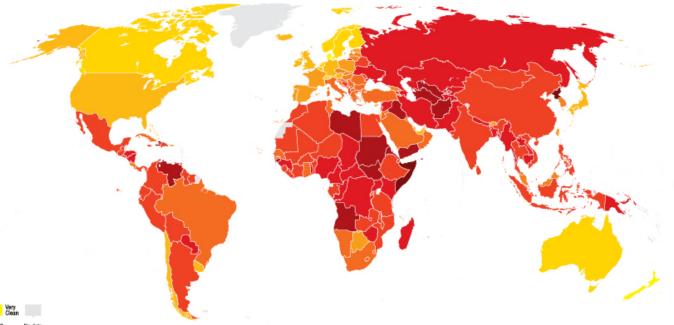
SIXTEENTH PHARMACEUTICAL REGULATORY AND COMPLIANCE CONGRESS OCTOBER 22 2015

Robert Barrington Executive Director, Transparency International UK



CORRUPTION PERCEPTIONS INDEX 2014

The perceived levels of public sector corruption in 175 countries/territories around the world.



	SC0											
Highly Corrupt											Very Clean	
	0-9	10-19	20-29	30-39	40-49	50-59	60-69	70-79	80-89	90-100		No data

COUNTRY/TERRITORY	SCORE	21	Chile	73	FANK	COUNTRY/TERRITORY	SCORE	61	Oroatia	48	RANK	COUNTRY/TERRITORY	SCORE	100	Algeria	36	BANK	COUNTRY/TERRITORY	SCORE	136	Nigerla	27	RANK	COUNTRY/TERRITORY	SCOP
Denmark	92	21	Uruguay	73	39	Slovenia	58	61	Ghana	48	80	Bosnia and	39	100	China.	36	119	Mozambique	31	136	Russia	27	156	Zimbabwe	21
New Zealand	91	23	Austria	72	42	Cape Verde	57	63	Cuba	46		Herzegovina El Salvador	39	100	Suriname	36	119	Sierra Leone	31	142	Cornoros	26	159	Burundi	20
Finland	89	24	Bahamas	71	43	Korea (South)	55	64	Oman	45	80	Mongolia	39	103	Bolvia	35	119	Tanzania	31	142	Uganda	26	159	Syria	20
Sweden	87	25	United Arab	70	43	Latvia	55	64	The FYR of	45	80	Maracco	39	103	Mexico	35	119	Vietnam	31	142	Ukraine	26	161	Angola	19
Norway	88		Emirates	80	43	Malta	55		Macedonia.	45	00	Burkina Faso	38	103	Moldova	35	124	Guyana	30	145	Bangladesh	25	161	Guinea-Bissau	19
Switzerland	88	26	Estonia	69 69	43	Seychelles	55	64	Turkey	45 44	85	India	38	103	Niger	35	124	Mauritania	30	145	Guinea	25	161	Halti	19
Singapore	84	26	France		47	Costa Rica	54	67	Kuwait		85	Jamaica	38	107	Argentina	34	126	Azerbaljan	29	145	Kenya	25	161	Venezuela.	19
Netherlands	83	26	Qatar Saint Vincent and	69 67	47	Hungary	54	67	South Africa Brazil	44	85	Peru	38	107	Djibouti	34	126	Gambia	29	145	Lace	25	161	Yemen	19
Luxembourg	82	29	the Grenadines	67	47	Maurttius	54	69		43	85	Philippines	38	107	Indonesia	34	126	Honduras	29	145	Papua New	25	166	Erttrea	18
Canada.	81	30	Bhutan	65	50	Georgia	52	69	Bulgaria	43	85	Sri Lanka	38	110	Albania	33	126	Kazakhstan	29		Guinea	~ .	166	Libya	18
Australia	80	31	Botswana.	63	50	Malayala	52	69	Greece	43	85	Thalland	38	110	Ecuador	33	126	Nepal	29	150	Central African Republic	24	166	Uzbekistan	18
Germany	79	31	Oyprus	63	50	Samoa	52	69	Italy	43	85	Trinidad and	38	110	Ethiopia	33	126	Pakistan	29	150	Paraguay	24	169	Turkmenistan	17
loeland	79	31	Portugal	63	53	Czech Republic	51	69	Romania	43	85	Tobago	35	110	Kosovo	33	126	Togo	29	152	Congo Republic	23	170	Iraq	16
United Kingdom	78	31	Puerto Rico	63	54	Slovakla	50	69	Senegal	43	85	Zambia	38	110	Malawl	33	133	Madagascar	28	152	Tajikistan	23	171	South Sudan	15
Belgium	76	35	Poland	61	55	Bahrain	49	69	Swazland	43	94	Armenia	37	115	Oôte d'Ivoire	32	133	Nicaragua	28	154	Chad	22	172	Arghanistan	12
Japan	76	35	Talwan	61	55	Jordan	49	76	Montenegro	42	94	Colombia	37	115	Dominican	32	133	Timor-Leste	28	154	Democratic	22	173	Sudan	11
Barbados	74	37	larael	60	55	Lesotho	49	76	Sao Tome and Principe	42	94	Egypt	37		Republic	~~	136	Cameroon	27		Republic of the Congo		174	Korea (North)	8
Hong Kong	74	37	Spain	60	55	Namibia	49	78	Serbla	41	94	Gabon	37	115	Guaternala	32	136	Iran	27	156	Cambodia	21	174	Somalia	8
Ireland	74	39	Dominica	58	55	Rwanda.	49	79	Tunisia	40	94	Liberta	37	115	Mali	32	136	Kyrgyzstan	27	156	Myanmar	21			
United States	74	30	Lithuania.	58	55	Saudi Arabia	49	80	Benin	39	94	Panama	37	119	Belarus	31	136	Lebanon	27						

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- Why are we doing it?
- What change are we seeking?
- What is the problem?
- What will we do?
- What have we learnt so far?
- How is it relevant?

A GLOBAL PROBLEM



- \$7 trillion annual global spend
- 17% of people worldwide stated they had paid a bribe when dealing with the medical sector Global Corruption Barometer, 2013
- Estimate 10-25% public procurement funds lost to corruption
- Pharmaceutical & healthcare sector supply chains are global, long and complex

Why are we doing it?

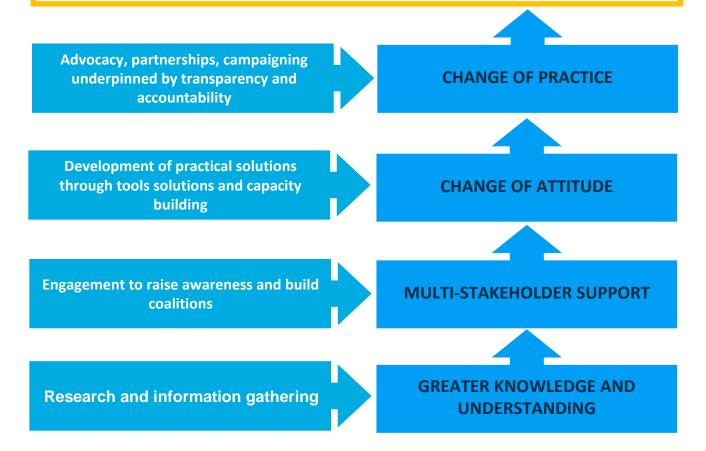


- Impact on lives of ordinary people
- Known levels of corruption
- Views of stakeholders
- Support from TI chapters globally

THEORY OF CHANGE







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What change are we seeking?



- Purpose: to achieve genuine change in the pharmaceutical & healthcare sector through reducing corruption and promoting transparency, integrity and accountability
- Which means...
 - Greater understanding of corruption in the sector
 - Acknowledgment of the problems
 - Development and acceptance of solutions
 - Greater transparency and accountability
 - Reduced levels of corruption
 - Better outcomes for patients

What is the problem?



- Five key areas identified
- Procurement and distribution
- Marketing practices
- Manufacturing, including counterfeits
- Registration processes.
- Research & Development

PRIORITISING IN THE PHARMACEUTICAL & HEALTHCARE VALUE CHAIN







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What will we do?

- In theory
 - Research
 - Standard-setting
 - Multi-stakeholder dialogue
- In practical terms
 - Publishing typologies and trends
 - Illustrative research into key areas eg Ebola
 - Developing and publishing indices
 - Producing good practice guidance
 - Advocacy to companies, governments, regulators, global health community



TI'S GOVERNMENT DEFENCE ANTI-CORRUPTION INDEX



ARGENTINA

COLOMBIA

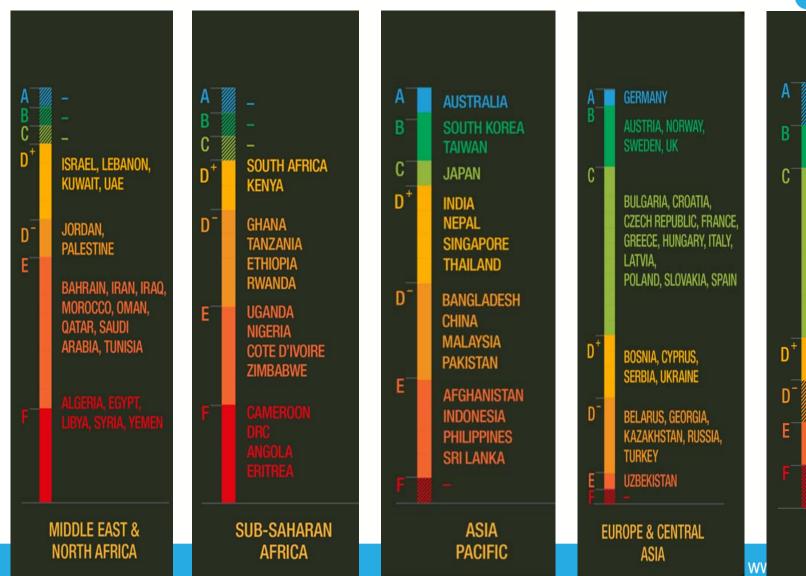
MEXICO

VENEZUELA

AMERICAS

BRAZIL

CHILE



TI'S DEFENCE COMPANIES **ANTI-CORRUPTION INDEX**

AIRBUS GROUP

BAE SYSTEMS PINMECCANICA GENCORP

ROLLS-ROYCE THALES

NORTHROP GRUMMAN RAFAEL ADVANCED DEFENSE SYSTEMS

ULTRA ELECTRONICS

KBR

RESULTS

BASED ON PUBLIC INFORMATION

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BOOZ ALLEN HAMILTON DAEWOO SHEPBUILDING & MARINE ENGINEERING ELDET SYSTEMS FINCANTIER GENERAL DYNAMICS HARRIS CORPORATION ISRAEL AEROSPACE INDUSTRIES KONGSBERG LEIDOS NAMMO OSHKOSH SAAB

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(31)

AV BRAS INDÚSTRIA AEROESPACIAL **BALL AEROSPACE & TECHNOLOGIES CORP** CAE CURTISS-WRIGHT CORPORATION DENEL ESTERLINE TECHNOLOGIES HINDUSTAN AERONAUTICS INDRA MBDA MISSILE SYSTEMS METSUBESHE HEAVY INDUSTRIES NAVISTAR PRECISION CASTPARTS CORP. SAFRAN **TELEDYNE TECHNOLOGIES** TR/UMPH GROUP

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TI'S DEFENCE COMPANIES ANTI-CORRUPTION INDEX

RESULTS BASED ON INTERNAL INFORMATION



ACCENTURE (0) AARBUS GROUP (8) BAL SYSTEMS (8) BECHTEL (A) DOEING (C) COUMAM (9) DAY & ZIMMERIMANN (0) DAY & ZIMMERIMANN (0) COMMUNICATION COMMUNICATIONS LOCKHEED MARTIN (A) GINETIN (0) RAYTHEON (A) SERCO GROUP (0) THYSSENKRUPP AS (8) UNITED (1) THYSSENKRUPP AS (8) UNITED (1)	B B B C25 B B C25 B C25 B C25 B C25 B C25 B C25 B C25 C25 C25 C25 C25 C25 C25 C25	8 90986 80080 0 000000000000000000000000	AlDC (1) GAE (D) DAEWOO SHEPBUELDING (C) BAARWE ENGINEERING FINCANTIERI (C) BSRAEL MILITARY (E) INDUSTRIES MESSON ESSENTIAL (C) NAMMO (C) BAFRAN (D)	
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What have we learnt so far?



- Challenging to TI as an NGO
- Huge interest among TI's 100 national chapters
- Entrenched practices and positions
- Need to look at entire chain
 - Pharma and Healthcare
- Need to look at governments, companies, regulators and health authorities
- Citizens (patients) are angry
- Transparency is a game-changer
- Pharma companies can lead change



How is it relevant to pharma compliance?

- If we are successful
 - Greater scrutiny
 - Emerging global standards
 - and level playing field
 - Reward for good practice transparency dividend
 - Potentially disruptive
 - to long-established practices
- If we fail
 - It may happen anyway
 - Through imposition not through dialogue

GOAL



IMPROVING GLOBAL HEALTH AND HEALTHCARE OUTCOMES FOR THE BENEFIT OF ALL PEOPLE OF ALL AGES

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