

## Submission of The Netherlands

Dear colleague,

Thanks for sharing this information with us. Although a little late, I would like to provide some feedback -hope it is still usefull.

Regarding the introduction, I would like to remark that the task of the working group is *"examine current financing and coordination of R&D, and proposals for new and innovative sources of funding to stimulate R&D related to Type II and III diseases, and the specific R&D needs of developing countries in relation to Type 1 diseases"*. However, later on you state that *"Mechanisms are examined in relation to their stated R&D goal rather than their 'type', with key questions being: What disease area, product type, innovation type, R&D area and R&D actors does this mechanism seek to fund and/or incentivize? How well does it achieve this objective?"*. This approach leads to a limitation of the research included, namely to product development only. Whereas research and development can include social sciences as well (behavioural research, health systems research etc). Perhaps you can clarify the rationale behind this limitation?

Regarding the criteria, see enclosed my personal score. Of course most of the criteria mentioned are in a way important, but I have tried to select those that are crucial to use. The 'effectiveness' criterium is a bit difficult to interpret, as mostly we *expect* effectiveness, but it doesn't have to be *proven* (not always possible to proof in advance).

I think the framework and inventory make sense and present a good overview of options, although I feel that information on clinical trials is missing. In particular the EDCTP is a huge funder of clinical trials for HIV, TB and malaria and should be mentioned. It is not just a plain subsidy instrument, but a 'European Economic Interest Group' that coordinates national research activities to increase efficiency and quality. It also seems that you have not included the classic financing mechanisms (TDR, subsidies like the the FP7 programme for poverty related diseases (DG research), NIH). Why not? They still are part of the list of options and are will probably remain a powerful source / partner for future collaboration. Another 'mechanism' which I could not see but may be included, is the mechanism of financing research by commercial licensing of by-products, something which is often done by PDPs. Perhaps this can be explored much more pro-active.

Finally, what is missing in the new government funds is the basic discussion on 0,7% GDP. It was also missing in the report of the Task Force on innovative funding: why should we be innovative, if even some of the G8 countries have not yet committed to the 0,7% goal? Another internationally agreed goal is to spend at least 5% of your health budget on health research. I would strongly suggest the task force to use those figures in any overall communication.

I hope this was useful. If you have any questions or suggestions, please do not hesitate to contact me.

Kind regards,