Funding HIV-vaccine trials in developing countries – What's wrong with IAVI's recommendation?

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"IAEN: Pre-Conference Meeting"

Vienna, 16 – 17 July 2010

- → Background
- → International unconditional income transfers
- → International in-kind versus income transfers
- → Conclusions

Background: The dilemma in vaccine research

- A vaccine is the key to accelerate the achievement of MDG 6.
- Pharmaceutical companies are little involved in HIV-vaccine research, because
 - discovery is an international public good (Kremer, 2006).
 - asymmetries in R&D interests
- o AIDS-vaccine trials in developing countries as an alternative (IAVI, 2004)?

Basic message and approach

- Targeting income or in-kind transfers to developing countries in order to accelerate the development of an AIDS vaccine is counterproductive.
- Concept of international public goods; supply-side characteristics as additional perspective.

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International unconditional income transfers (I)

The basic model:

- o n agents,
- o two commodities (y_i, G) ,
- o private good $y_{i,}$
- public good "finding an AIDS vaccine" G,
- o utility function $U_i(y_i, G)$,
- marginal cost differentials,
- o endowed with income I_i

International unconditional income transfers (II)

Time structure of actions:

o 1. Stage:

Which part of income should be transferred to recipients?

o 2. Stage:

How much will be spent on both commodities?

International unconditional income tranfers (III)

 Proposition 1: The overall public good provision level cannot fall if a non-contributor makes an income transfer to a contributor.

o Proof:

$$\Delta G < 0$$

$$\Rightarrow G' < G^*$$

$$\Rightarrow y' > y^*$$

$$\Rightarrow y' = h_i(G') < y^* = h_i(G^*)$$

$$\Rightarrow y' < y^*$$

International unconditional income transfers (IV)

 Funding R&D in developing countries is justified by the epidemiology of HIV.

However: small global benefit spillovers; recipients have incentives to spend money for other purposes

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International in-kind versus income transfers (I)

o budget constraint changes due to in-kind option:

case 1: agent i receives an in-kind transfer

$$y_i + p_i g_i^i + p_j g_i^j = I_i + p_j g_i^j \text{ für } g_j \le G$$
 (2)

case 2: agent i gives an in-kind transfer

$$y_i = I_i - (p_i g_j^j + p_i g_i^i) + p_j g_j^j \text{ für } g_j > G$$
 (3)

International in-kind versus income transfers (II)

 Proposition 2: An-kind transfer may be paretosuperior to an income transfer if a recipient is more cost-efficient than a donor.

o **Proof**: Summing up (2) and (3) for n = 2:

$$y_1 + y_2 + p_1G + (ep_1 - p_2)g_1^2 = eI_1 + I_2$$
 (4)

International in-kind versus income transfers (III)

- Optimal strategy depends on the relative price of providing a health-promoting public good.
- Vaccine research has to be monopolized in industrialized countries.
- Asymmetries in R&D interests ⇒ incentive compatible mechanisms ⇒ pull strategies

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Conclusions

- Funding HIV-vaccine trials in developing countries will not be effective because of aid dispersion.
- In-kind transfers are preferable only if recipients have a cost advantage.
- Asymmetric interests in R&D can be addressed by vaccine purchase commitments.
- However: Analyses possess some methodological limitations.



