

Glossary

Glossary of Selected Terms and Abbreviations Used

<i>Armenian Diaspora</i>	Term used by Armenians to refer to Armenians living outside of Armenia, primarily in the Americas, Europe, and the Near East.
<i>Consignee</i>	A recipient of drug donations from a primary donor (such as a pharmaceutical producer) or from a secondary donor (such as a PVO consolidator).
<i>Consolidator</i>	A private voluntary organization that collects drug donations from multiple sources (mainly producers but also distributors and other sources) for distribution (as a donation) to multiple recipients.
<i>Country EDL Drug</i>	In this report's classification system, a donated drug that is listed on the recipient country's national EDL.
<i>Dating</i>	The amount of time prior to the manufacturer's stated expiration date on a given drug.
<i>Donation</i>	Refers to "gifts-in-kind" or the donation of products or services. When financial donations are discussed, they are specifically identified.
<i>Essential Drugs</i>	According to the WHO, those drugs "that satisfy the health care needs of the majority of the population; [...and that] should therefore be available at all times in adequate amounts and in appropriate dosage forms."

<i>Essential Drugs List (EDL)</i>	A country-specific list of drugs considered necessary to meet the health care needs of the majority of the population and appropriate for use in the specific country setting.
<i>Expiration Date</i>	The date established by the manufacturer and printed on the package after which the quality of a drug product and its related efficacy and safety are not guaranteed and after which the product should not be used.
<i>Gifts-in-Kind</i>	Non-monetary donations from individuals or organizations to other individuals or organizations.
<i>IDA</i>	A major nonprofit manufacturer and distributor of drugs and drug kits, located in Holland, with production facilities in Malta and other countries.
<i>Marz</i>	Large areas or districts in Armenia.
<i>MOH</i>	Ministry of Health.
<i>MSSP</i>	Ministry of Public Health and Population (Haiti).
<i>NGO</i>	Non-governmental organization. NGOs are distinguished from PVOs in the country studies in order to distinguish in-country recipient organizations (NGOs) from foreign-based donor organizations (PVOs).
<i>Non-List Drug</i>	In this report's classification system, a donated drug that is neither listed on the recipient country's EDL nor is a therapeutic alternative for a drug on the country's EDL, and is not listed on the WHO-ML.
<i>PAHO</i>	Pan American Health Organization.
<i>PDR</i>	<i>Physicians' Desk Reference.</i> The PDR is a published reference guide which lists drug descriptions, indications and contraindications of US Food and Drug Administration approved drugs.

<i>Production for Donation</i>	The manufacture of drugs by a pharmaceutical company specifically for the purpose of donation after manufacture.
<i>PVO</i>	Private Voluntary Organization. PVOs are organizations that collect donations of drugs and medical supplies and equipment, and make them available to health care facilities that have a need for them. PVOs may have offices within recipient countries, but are distinguished in this report from NGOs to clarify the donor/recipient relationship.
<i>Remaining Shelf-Life</i>	The number of days between the expiration date of the drug product and another date (in this report, usually the date of shipment by the PVO).
<i>Returned Drugs</i>	Drugs which have been dispensed to patients and subsequently returned to a pharmacist or other entity prior to donation.
<i>Parastatals</i>	Manufacturers and other industries run by the government. These companies provided healthcare services for their employees in Tanzania.
<i>Shelf Life</i>	The amount of time prior to the expiration date established by the drug manufacturer. Synonymous with dating.
<i>Shipment</i>	All shipment items sent by a PVO on the same date to the same country.
<i>Shipment Item</i>	One donated drug product in a particular dosage form, strength, and package size that was listed on the PVO's shipment list as a line item. Multiple shipment items existed of the same drug product, and each shipment item was counted separately.
<i>Therapeutic Alternative</i>	In this report's classification system, a donated drug that is not listed on the recipient country's EDL but belongs to the same therapeutic class as a drug listed on the national EDL and belongs to a therapeutic class for which the WHO-ML allows the use of alternatives.

Therapeutic Class or Group A pharmacological category of drugs; these drugs often have commonalities in their chemical structures, and share similar mechanisms of action and indications for use.

Unique Drug Product A particular drug, in a particular dosage form and strength (without regard to package size). In this report, a unique drug product was classified as on the country EDL or WHO-ML if the drug in the same dosage form was listed on the respective list for the same indication (without regard to strength). Each unique drug product was counted once, even if the same product was shipped multiple times.

WHO World Health Organization.

WHO Model List (WHO-ML) A list of drugs published by WHO since 1977 and updated biennially to guide countries in the development of an essential drugs program. The list recommends specific drugs for inclusion on a country's national EDL. This study used the 1995 Model List, which organizes 304 drugs into 27 therapeutic sections.

WHO-ML Drug In this report's classification system, a donated drug that is not listed on the recipient country's EDL, but is listed on the WHO-ML.

The Authors

Lisa M. Bates is a graduate of the Population and International Health program at the Harvard School of Public Health. Previously at the Overseas Development Council, Ms. Bates has been involved in numerous policy research studies on health, population, and development issues. Her current research interests focus on the social determinants of reproductive health behaviors and outcomes. In 1997–98, as a Harvard Frederick Sheldon Fellow, Ms. Bates conducted a program of exploratory and intervention research on gender issues and reproductive health decisionmaking and behaviors in rural Bangladesh, focusing particularly on couple communication and men's roles. With support from the Hewlett Foundation, she is also now involved in a qualitative study of the impact of the transition from domiciliary to clinic-based family planning in Bangladesh.

Michèle Derai-Cochin received an MPH from Dauphine University, an MBA from Ecole des Hautes Etudes Commerciales, and an M.Sc. from Hebrew University. She has ten years' experience in the pharmaceutical industry both in France and in the United States. She has provided in-depth analysis and strategic recommendations on pharmaceutical products and markets for this sector. Past positions include Market Research Manager for the pharmaceutical company Zambon France, where her responsibilities included product-pricing negotiations with the French government. She is particularly interested in the relationship between the public and private sectors in public health issues.

Karin A. Dumbaugh is a lecturer in international health management in the Department of Population and International Health at the Harvard School of Public Health. Her areas of research focus on the organization, financing, and output of health care systems, and on the political importance of stakeholders. Of special interest to her is the performance of public and private markets in health insurance, hospital services, and pharmaceuticals. She has also conducted market research for non-health care related firms.

Frank J. Massaro is Director of Pharmacy at the North Shore Medical Center; Salem Hospital. He has an appointment as Assistant Clinical Professor in the Department of Medicine at Tufts University School of Medicine and is Adjunct Assistant Professor of Clinical Pharmacy at the Massachusetts College of Pharmacy and Allied Health Sciences.

Thomas McLaughlin, Assistant Professor in the Faculty of Medicine, is a member of the Department of Ambulatory Care and Prevention at Harvard Medical School (HMS) and Harvard Pilgrim Health Care (HPHC) in Boston, MA. Trained as a molecular biologist and health services researcher, Dr. McLaughlin's research interests are focused on: the mental health needs of populations; access to and quality of care in the chronically mentally ill; and quality of care among patients with acute myocardial infarction. He currently co-directs a National Institute of Mental Health funded project at HPHC aimed at building a mental health research infrastructure program in primary care. In addition, he is involved in both domestic and international quality improvement initiatives in cardiovascular medicine as part of the HMS/HPHC Drug Policy Research Group.

Michael R. Reich is Taro Takemi Professor of International Health Policy and Chairman of the Department of Population and International Health at the Harvard School of Public Health. He also serves as Director of the Takemi Program in International Health. He received his B.A. in Molecular Biophysics and Biochemistry, M.A. in East Asian Studies, and Ph.D. in Political Science, all from Yale University, and has been a member of the Harvard faculty since 1983. His research interests are comparative public policy and political economy, with particular attention to health policy and pharmaceutical policy.

Anita K. Wagner is Senior Project Director at the Health Institute, New England Medical Center, Assistant Clinical Professor in the Department of Neurology at Tufts University School of Medicine, and Adjunct Assistant Professor of Clinical Pharmacy at the Massachusetts College of Pharmacy and Allied Health Sciences. She received a doctorate in clinical pharmacy from Massachusetts College of Pharmacy and a Masters of Public Health degree from the Harvard School of Public Health. Her research interests include cross-cultural health status measurement and the assessment of the impacts of drug therapy on people's functioning and well-being.