WHAT IS BSR’S HEALTHCARE WORKING GROUP, AND WHO ARE ITS MEMBERS?
Established in 1999, BSR’s Healthcare Working Group serves as a forum for peer companies to discuss and collaborate in a precompetitive manner on corporate social responsibility issues. More details can be found on the BSR Healthcare Working Group page.

WHY DID THE WORKING GROUP DEVELOP GPAH?
Improving access to healthcare is a pressing societal challenge, and member companies recognize a need for collaborative and system wide approaches to which industry can meaningfully contribute.

Working group members created GPAH to build a common framing of the industry’s approach to expanding access to quality healthcare globally. By providing a definition agreed on by the industry it is hoped that GPAH can help structure stronger dialogue and engagement that will further drive change and expand access to healthcare.

HOW WERE THEY DEVELOPED?
From the beginning, GPAH were designed to complement and align with initiatives already undertaken by stakeholders and individual companies. Throughout the drafting process, GPAH were informed by consultations with more than 20 stakeholders, representing socially responsible investors, nongovernmental organizations, policy advisors, and multilateral organizations.

Facilitation from BSR supported the group in integrating stakeholder perspectives and in reaching broad alignment on the final principles reflected in GPAH.

WHAT IS UNIQUE ABOUT GPAH?
Where GPAH make a unique contribution is in marking the industry’s effort to come together to advance a common framework for their approach to expanding access to healthcare.

They reflect and build upon the experience and lessons learned by the industry from working with many stakeholders to help improve access to medicines and vaccines for areas as diverse as HIV/AIDS, neglected tropical diseases, and childhood immunization.

WHAT IS THE ROLE OF GPAH?
As an agreed set of approaches and principles, GPAH offer a foundation and guide for companies for developing individual, internal policies, procedures and practices to deliver on their commitments to improving access.

It is hoped that these principles will contribute to thinking around the Post-2015 Development Agenda, and that they may support signatories in fulfilling their agreed aspirations to:

» Explore and develop appropriate ways to increase our contributions in the areas set forth in the GPAH.
» Collaborate with key stakeholders including governments, multi-lateral organizations, global health organizations, NGOs, and other industries, to address our shared responsibility for expanding access to healthcare.
» Share progress with stakeholders on activities in support of expanding access to healthcare.

At the same time, it is important to note that GPAH do not replace or supersede a company’s independent strategies, policies, and engagements on access to health.

HOW ARE GPAH POSITIONED WITH REGARD TO OTHER INITIATIVES?
The principles have been designed with the intention of complementing and aligning with existing initiatives.

The signatories’ intention is to provide useful input to an evolving global discussion on appropriate industry approaches for expanding access to healthcare.

WHO ARE THE SIGNATORIES?
The GPAH have been signed by 13 CEOs of major healthcare companies with global leadership in pharmaceuticals, vaccines, diagnostics, and other medical technology. Their signatures demonstrate a clear commitment to improving access to healthcare, at both company and industry-wide levels.

Founding signatories are members of BSR’s Healthcare Working Group which initiated and developed these principles. Additional outreach beyond the working group membership brought further support to the initiative.

Organizations may become signatories of these principles whether or not they were involved in the initiation and development of these principles. Inquiries may be sent to BSR at web@bsr.org.