

# CLAN Drug Donations to Developing Countries Policy

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## 1. Introduction

CLAN's mission has highlighted the need for correct medicines to be available to families with few resources in resource poor countries. However, due to legislation in some countries, the drugs required may not be produced within the country. Also, the correct medicines are sometimes not allowed to be imported, or the drugs may be imported but costs of import taxes and other factors such as storage and distributions may make the drugs unaffordable for families.

CLAN endeavours to work with partners for change to improve the availability, accessibility and costs of drugs to health services and families so that children may have a better life. CLAN is committed to working in an advocacy role to support legislative change in order to make medications and/or medical equipment more accessible for children with needs. CLAN also seeks opportunities to partner with pharmaceutical companies for drug donations to support children with CAH and other rare diseases in resource poor countries such as Vietnam, Philippines, Indonesia and Pakistan.

## 2. Purpose

This Policy is to guide CLAN's decisions about their role and responsibilities relevant to the donation of drugs given to developing countries for children participating in CLAN's programs or projects. It is essential that when drugs are donated to resource poor countries, the medicines provided are to meet specific health needs, and that they will be distributed ethically and administered correctly.

## 3. Scope

This Policy applies to CLAN's governing body and all partners and affiliates involved in CLAN programs.

## 4. Definitions

<b>Term</b>	<b>Definition</b>
Drug Donation	The act of presenting drugs as a gift, grant, or contribution.

## 5. Policy

CLAN is committed to adhering to the WHO Guidelines for Drug Donations (1999) (specifically s.VI, Management of drug donations by the recipient), WHO Guidelines for Medicine Donations (2010) and the APAC Australian guidelines for drug donations to resource poor countries (2001). CLAN will also work with partners to ensure adherence to the guidelines. CLAN may source supplies for drugs to meet identified needs for those involved in CLAN programs, or CLAN may respond to requests from individuals or groups for particular drugs needed for a specific purpose in work currently being undertaken in that country that aligns with CLAN's mission.

## 6. Procedures

CLAN will work with the donor of drugs to ensure that donated drugs are appropriate, and affordable, and will meet the specific requirements of children with Non-Communicable Diseases (NCD's).

The following guidelines presented in the APAC Australian guidelines will be the basis for discussions and written contracts or agreements with any donor wishing to donate drugs for children participating in CLAN programs or projects.

### **1 All drug donations are to be based on an expressed need**

For each donation, and before it is accepted and distributed, CLAN will collate evidence of specific needs, distribution processes, information about recipients, and assessment of any needs for training of professionals or persons who administer the drugs to children. All drugs should be on the national list of essential drugs of the recipient country, or if such a national list is not available, on the WHO List of Essential Drugs for Children. In cases where drugs are not available or affordable in the country, CLAN will endeavour to work with partners and government agencies to facilitate change in order improve the health of children with NCD's. Drugs will not be sent until approvals and relevant clearances have been finalised by both the recipient and CLAN. CLAN will encourage countries who do not have the drugs on their national list to make every effort to pursue this.

### **2 All drugs should comply with quality standards in both the donor and recipient country.**

As part of its risk management strategies, CLAN will work closely with pharmaceutical companies who agree to donate drugs to developing countries to ensure the quality, suitability and shelf-life of donated drugs. No drugs should be donated that have been previously given to other recipients and returned. Timeframes for sending, receiving and administering the drugs will be part of each contract or agreement. Documentation will be kept if donated drugs need government permission to be exported. Recipients should formulate their own national guidelines for drug donations, based on international guidelines. If relevant, written permission to export certain drugs must be obtained from the Australian Government of Health and Ageing prior to sending drugs overseas.

### **3 Presentation, packaging and labelling.**

Drugs should be labelled to meet the needs of recipients, and include information such as name, dose, strength, manufacturer, storage conditions, expiry date. Planning should involve research and determination of quantities of drugs desired as donations for specific medical conditions, for example, children with Congenital Adrenal Hyperplasia (CAH). Administration of the drugs is to be recorded, including administrators, dates, recipients of each drug given, and any usual effects of the drug on the recipient.

### **4 Export and transport**

To achieve desired outcomes, CLAN will work with all partners to determine quantities, dates, persons responsible in sending and receiving and distributing the donated drugs. Documents must be kept covering costs (and who is responsible for costs), transport and clearance arrangements, and storage of drugs until distributed. Costs of getting the donated drugs to the recipients should be covered by the donor unless otherwise agreed. Details including e.g packaging, labelling, quantities, dates, consignments, should be clearly understood by both the donor and recipient/s.

### **5 Management**

CLAN will work closely with the donor/s of drug donations at all stages of planning and sending the drugs to developing countries. Where relevant, CLAN will be involved in programs and projects where education and training seminars are aligned with drug donations. Disposal of any drug donations that are not suitable will be by the recipient medical service according to their policies and procedures.

### **6 Review**

CLAN will review the processes and outcomes of drug donation's with the relevant pharmaceutical company, distributors and professionals who work with the families of children with NCD's. Any issues will be recorded and researched further to aid planning for efficiency and effectiveness for any future donations.

### **CLAN: RECORD FOR DRUG DONATIONS: Plan or Project Details**

Country and location

Recipient Administrator of drug donation.

Name, title,

Contact details

Plan or project aligned with drug donation

Donor for the drug donation Pharmaceutical company Purpose, statement of needs Goals and stated outcomes Name of Drug

Amount of drugs donated Governing authority approval

Other Personnel involved

Estimated number of:

\* ages of children, \*NCD \* number of families

Community involvement (where applicable)

Sustainability Plan

Monitoring and reporting on program implementation

Other Partners involved in the program/project (if relevant)

Estimated risks

Estimated timeframes: planning, sending, receiving

Estimated budget (costs?)

Recognition of CLAN and donor's contributions

Monitoring procedures

Final report

**Date presented to CLAN Executive Committee:**

Initial plan..... Final report.....

**Signature of President**.....

**References**

Australian Pharmaceutical Advisory Council (APAC ),  
Australian guidelines for drug donations to developing countries 2000.  
WHO Guidelines for Drug Donations 1999  
WHO Guidelines for Medicine Donations 2010