

Q&A

The giving machine

Flush with Microsoft's fortune, the Bill & Melinda Gates Foundation is the largest charitable foundation in the United States. Tadataka Yamada, executive director of its Global Health Program, tells Lucy Odling-Smee how the organization aims to save lives with its wealth.

Empowering and enriching the developing world requires tens of billions of dollars a year. How can the Gates foundation hope to make a difference?

The Gates foundation contributes roughly 10% of the US\$12.7 billion a year spent on health-related aid to developing countries by donors such as the United States, United Kingdom and France.

The world needs to commit a lot more funding to improving global health. Estimates of the additional resources that are needed to meet the United Nations Millennium Development Goals for health range from \$25 billion to \$70 billion per year. We believe that our funds have been catalytic in many ways. For example, our initial \$750 million contribution to the GAVI alliance — formerly known as the Global Alliance for Vaccines and Immunisation — prompted further donations of more than \$2 billion. GAVI has helped to increase immunization rates in millions of children in 70 developing countries.

How do you decide where to allocate your money within the Grand Challenges in Global Health initiative?

The Grand Challenges initiative was created to support ground-breaking research on some of the most fundamental scientific problems in global health. Its scientific board, which includes 20 scientists and public-health experts from around the world, identified 14 major challenges in global health and then reviewed proposals for research to overcome these challenges. Guided by the board's recommendations, we selected 43 projects to fund — ranging from heat-stable vaccines that don't require refrigeration to insect repellents that interfere with disease-carrying mosquitoes' sense of smell.

Are there any areas you have specifically decided not to fund?

We focus most of our resources on the health problems that disproportionately affect

developing countries and that don't receive enough attention and resources — particularly infectious diseases; maternal, newborn, and child health; and nutrition. Although many important health issues fall outside of this scope, we believe that this focus will help us have the greatest impact on the people in greatest need.

What is the best way for a biomedical researcher to win funding from the Gates Foundation?

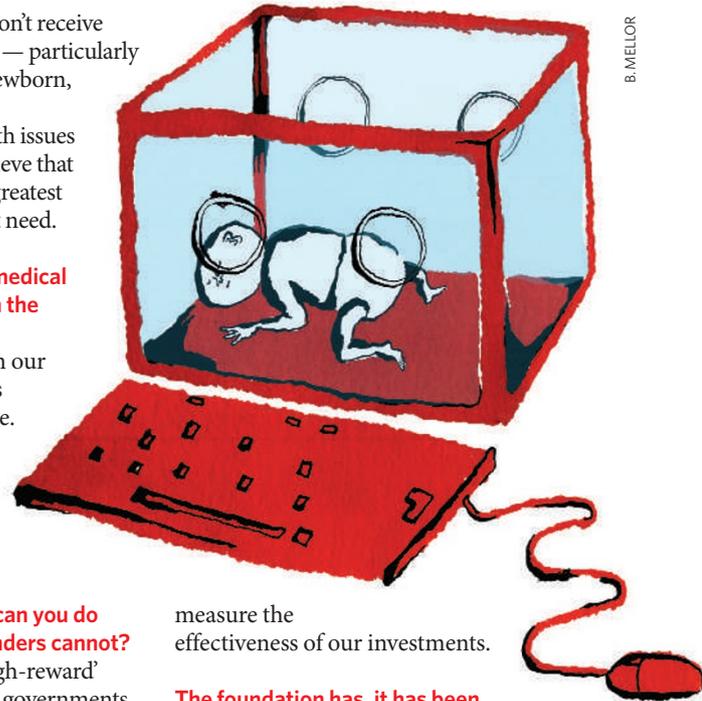
We fund projects that fit within our global-health strategy, which is covered in detail on our website. We are very focused on real-world outcomes, so we tend to favour research that, if successful, can be translated quickly to the field.

As a private foundation, what can you do with your money that other funders cannot?

We often support 'high-risk, high-reward' projects that can be difficult for governments or the private sector to fund. For example, the Medicines for Malaria Venture, one of our major grantees, is partnering with industry to conduct clinical trials of new treatments for malaria. Private companies would not be able to fund these trials alone, because of the high financial risk of conducting expensive trials on products that do not have a market in wealthy countries.

How are scientists who are funded by the Gates Foundation held to account?

We require grantees to report on their progress against agreed-on milestones, and we often support third-party evaluations of our grants. 'Productivity' is a tricky concept — we know that some of the research we support will fail, but that doesn't mean those researchers weren't productive. Even a failed study can contribute to the body of knowledge in its field and help point the way forward. We also provide funding to outside organizations to



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measure the effectiveness of our investments.

The foundation has, it has been reported, no guidelines for judging the ethics of companies its funds are invested in. Is that a tenable position for the world's leading philanthropic fund?

The foundation's outside investment managers have no involvement in our grant-making decisions, and our programme teams have no involvement in investment decisions. A detailed explanation of the investment strategy for the endowment is available on our website.

Is there a risk that your dominant role in funding global health will skew the research agenda?

It is not our goal to set the global health agenda, and we can succeed only if we help encourage greater funding from other donors. It is important to note that although our resources are significant, we account for a small portion of what is spent on health globally. For example, in 2005, our global-health budget was about \$1 billion, whereas the National Institutes of Health's budget was nearly \$30 billion.

Lucy Odling-Smee is *Nature's* associate editor for Essays.



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