

MODERN INTELLECTUAL PROPERTY GOVERNANCE AND OPENNESS IN EUROPE: A LONG AND WINDING ROAD?

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Recent thrust on social innovation (Spiesberger et al., 2018) aligns well with the highlighted importance for societal components in innovation models like the Quintuple Helix theme (Carayannis and Campbell., 2010). This theme is illustrated as contextual aggregations of academia, industry, governments, civil society and social environments.

Legitimising health innovation policy under the Quintuple helix theme requires conceptualizing and practising multiple knowledge interactions in networked environments that involve diverse actors, incorporate a multitude of rules, embrace transdisciplinarity, evince transgressive expertise and orient towards larger systemic transformations (David Wield et al., 2017). Simply put, it is about the socialised management of knowledge (Anderson and Hardwick., 2017) achieved by integrating socio-technical transformative prescriptions to the policy frameworks of technological systems (Webber and Rohracher., 2012). Such management in an operational sense is however very complex in view of fundamental challenges created by,

1. The myriad of stakeholder objectives along the health innovation contours, both at the level of technological innovation systems and the larger socio-technical regime frameworks (Geels., 2002); and
2. The difficulties in enabling fair governance mechanisms to coordinate between the system-regime levels and to ensure stakeholder alignment in principles, objectives and benefits as conducive to public health policy (Bovaird and Löffler., 2003).

Imbibing these challenges, the overarching research question of this conference paper reads,

“How should governance be optimised as a confluence (Bovaird., 2005) of the formal “checks and balances” approach (contractual) and the more informal “give and take” approach (the trust-based relationships) to foster stakeholder synergy within Quintuple helix models for health?

Aligning this question to the researcher’s current work on delineating facets of intellectual property (IP) as a complex adaptive system that can bridge the innovation valley of death in health, more specific questions emerge as

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1. What is the role of IP as an instrument of openness in knowledge processes for health innovation?
2. How can IP be effectively used in trust building processes along health innovation platforms?
3. How can IP be captured as a reflection of principles underlying trustworthiness, trust, dynamic capabilities, transaction value and social capital in cooperation & collaboration agreements for health innovations?

Drawing upon established knowledge as for example, collaborating the right way using trust and contracts (Blomqvist et al., 2005) and integrating the same with illustrative treatise on larger trust related dimensions like social capital, civil society and democracy (Kenneth Newton., 2001), the researcher seeks deeper empirical evidence towards recommendations for IP centred governance (relational and contractual) modes that are specific for health innovations. Using a government promoted health technology validation platform as his unit of analysis to study ‘translational health research as a social innovation’, the researcher intends case history analysis, in-depth qualitative interviews with actors along the platform and legal analysis as methods to answer his research questions. These methods will be informed by relevant theoretical frameworks including among others the actor-network theory, agency theory, stewardship theory, stakeholder theory of organisation, IP theory, dynamic capabilities theory, knowledge exchange theory and social capital theory.

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