2016 Best in Business Action: Women & Girls

Webinar Presentation
June 24, 2016
9:00 AM – 10:00 AM
The 2016 Business Action on Health Awards opened with the Women & Girls category – receiving a record number of applications for a single category.

Applicants underwent a rigorous evaluation process by an independent panel of judges with global health expertise, drawn from across the public, private and non-profit sectors.

Johnson & Johnson was presented with the winning 2016 Women & Girls Award for their Private-Sector Pioneer in Fostering Innovative Partnerships to Prevent and Treat Obstetric Fistula program.

Commendations were given to:
- **BASF** – Affordable Nutritious Foods for Women
- **MSD** – MSD for Mothers
- **Philips** – Mobile Obstetrics Monitoring (MOM)
Speakers

Fostering Innovative Partnerships to Prevent and Treat Obstetric Fistula: Kimberlin Keller, Senior Manager, Corporate Contributions, Johnson & Johnson

Affordable Nutritious Foods for Women Program: Andreas Blüethner, Director of Food-Fortification & Partnerships, BASF

MSD for Mothers: Scott Higgins, Director, MSD for Mothers, MSD

Mobile Obstetrics Monitoring: Ankur Kaul, Product & Marketing Manager, Hospital to Home for Emerging Markets Business, Philips
2016 Business Action on Health Awards: Women & Girls - GBCHealth
Best in Business Action Webinar

June 24, 2016
Kim Keller
Sr Manager, Corporate Contributions
Johnson & Johnson
A Healthier World – One Community at a Time

At Johnson & Johnson, our CREDO responsibility inspires our Global Contributions Team to advance the health of communities in which we live and work, and the world community as well. We focus on saving and improving the lives of women and children, preventing disease among the most vulnerable, and strengthening the health care workforce. Together with our partners, we are making life changing, long term differences in human health.
Saving & Improving the Lives of Women & Children

- Improve maternal and infant health
- Promote the health and development of children and youth
- Advance the empowerment of women and girls
Our Continuum of Saving & Improving the Lives of Women & Children

- Pregnancy
- Birth
- Motherhood
- Post-natal (Newborn)
- Childhood
- Adolescents and women
Christine
Fanjakely – 18
Suffered 3 years
BASF Food Fortification in ANF4W
GBC Health Expert Connections Call

Dr. Andreas Blüthner
Director Food Fortification & Partnerships, BASF SE
Micronutrient Deficiency World Map
Adequate Vitamin A Intake is Necessary for Essential Body Functions

- **Fat**-soluble vitamin
- Viewed in isolation, Vitamin A is the most important micronutrient
- Essential for **visual function** as a component of rhodopsin
- Major role in maintaining immune function.
- Very important role in **reproduction**, and supports **growth, glandular functions** and **immune function**
- Important for the **skin**, the **integrity of mucosal surfaces** and normal **wound healing**
- Necessary for **Iron uptake**
Food Fortification

- **FF** means *increasing the content of an essential micronutrient* in a staple food, to improve its nutritional quality leading to a public health benefit.

- Private sector activities are aligned with public sector/NGO engagement.

- It involves a *market-based application* which reaches a large number of consumers, as eating habits can be maintained.

- As an example of a cost-effective measure, adding Vitamin A to edible oils *increases the price per bottle by only 0.2%*.

<table>
<thead>
<tr>
<th>Essential Micronutrients</th>
<th>Vitamins &amp; Minerals</th>
<th>Common Staple Food Vehicles</th>
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<tbody>
<tr>
<td>Vitamin A</td>
<td></td>
<td>Edible oil</td>
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<tr>
<td>Iodine</td>
<td></td>
<td>Milk</td>
</tr>
<tr>
<td>Iron</td>
<td></td>
<td>Flour</td>
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<tr>
<td>Zinc</td>
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<td>Sugar</td>
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<td>Rice</td>
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The BASF Food Fortification Initiative is part of multi-stakeholder alliances and projects in 35+ countries.
Goal: Increase the supply and demand of affordable nutritious foods in low-income population groups especially for women of reproductive age

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<tr>
<th>GIZ</th>
<th>BASF</th>
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<tr>
<td>Facilitation of multi-stakeholder dialogue</td>
<td>Technical advice for fortifying food producers</td>
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<tr>
<td>Capacity building of national institutions</td>
<td>Improve development of business models</td>
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<tr>
<td>Advice governments to develop local industry standards and labeling schemes</td>
<td>Offer analytic training, provision of mobile laboratory equipment</td>
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<td>Advice governments on the introduction of legislation</td>
<td>Provide product &amp; packaging solutions</td>
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→ 2008 to 2012

→ 2013 - 2017
**ANF4W Process**

- **Partner**: GIZ, Mühlenchemie, BioAnalyt, oil and flour producers
- **Aim**: At least 990,000 women of reproductive age in Kenya and Tanzania are served with micronutrient-rich foods
- **Countries**: Kenya & Tanzania, potentially additional countries from 2017
ANF4W Results, Challenges & Outlook

BASF contribution: 856,000 €

Business model developed for small scale millers

- 3 small scale and several medium scale oil producers started fortification

Thanks to QC, compliance increased by approximately one third

ANF4W in final list for GBCHealth – Business Action on Health awards

Outlook: scoping mission to further countries

2,850,000 women of reproductive age at risk of undernutrition reached with fortified foods
Small Scale Millers with Fortified Oil

Photo Credits: Claus Soendergaard, Technical Manager, BASF Food-Fortification
We create chemistry
Every day, 800 women die from complications of pregnancy and childbirth. Nearly all of these deaths are preventable.
Merck for Mothers is Merck’s 10-year, $500 million initiative to end preventable maternal deaths

5+ million women with improved access to quality care to date
1. enabling health providers
2. developing and delivering lifesaving products
3. empowering women
Local Private Providers Globally

About 40% of women receive maternal and family planning care from private health providers

**Antenatal care**
- 44% Private
- 56% Public

**Delivery care**
- 40% Private
- 60% Public

**Family planning**
- 37% Private
- 63% Public

*Private care includes all non-governmental care including for-profit and not-for-profit individuals and institutions

**Appropriate care for antenatal: one or more visits; for delivery: giving birth in a facility or with a skilled birth attendant at home; for family planning: using a modern contraceptive method*
### Priority Countries

<table>
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<tr>
<th>Country</th>
<th>Initiatives</th>
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| India  | • Accreditation  
• Social franchising - urban & rural  
• Telemedicine for access to remote care |
| Uganda | • Social Franchising  
• Accreditation  
• Community insurance and savings |
| US     | • State-based maternal mortality reviews  
• Standardized protocols for emergency obstetric care  
• Community efforts to address preexisting conditions |
| Zambia | • Development of entrepreneurial models for maternity homes |
| Senegal| • Informed Push Model to decrease stock-outs of family planning products |
KEY ACHIEVEMENTS

**U.S.**
Implemented evidence-based practices to treat the leading causes of maternal death in five states that account for one quarter of the nation's four million births and inspired government support of quality improvement efforts in eight additional states.

**SENEGAL**
Decreased stock outs of contraceptives to less than 2% in all public health facilities (from more than 80% in 2011) and helped increase the contraceptive prevalence rate to 20% nationwide (from 12% in 2011).

**UGANDA**
Expanded a social franchise network of private providers offering quality-assured maternal health services to 140 health facilities, covering one third of the country.

**ZAMBIA**
Designed community-managed, entrepreneurial maternity homes, and initiated partnership to develop them and evaluate whether they are an effective solution to help women receive timely, quality care.

**INDIA**
Improved the quality of private maternity care through social franchising, training, quality improvement and government accreditation in three high-burden states with a total population of 300+ million.

Merck
Merck for mothers
Committed to Saving Lives
5+ MILLION
TOTAL NUMBER OF WOMEN WITH IMPROVED ACCESS TO QUALITY MATERNAL HEALTHCARE AND MODERN CONTRACEPTIVES

3.5+ MILLION
WOMEN WITH IMPROVED ACCESS TO MODERN CONTRACEPTIVES

1.5+ MILLION
WOMEN WITH IMPROVED ACCESS TO QUALITY MATERNAL HEALTHCARE

2,500+
FACILITIES STRENGTHENED TO PROVIDE QUALITY CARE

5,400+
PROVIDERS AND COMMUNITY HEALTH WORKERS TRAINED
Maternal monitoring, where and when it matters

Mobile Obstetrics Monitoring (MOM)

Product Management
Healthcare IT
November 2015
Philips Mobile Obstetrics Monitoring (MOM)

Challenges in antenatal care delivery

Each year, 135M babies are born in the world

In that same period, 6.3M children under the age of 5 die

Every minute, a woman dies from pregnancy complications

Poor access to care in remote locations

Shortage of doctors and minimally equipped midwives

Need for early identification of high-risk pregnancies

Difficult to share non-electronic patient data

Inefficient workflows
Philips Mobile Obstetrics Monitoring (MOM)

Connecting home to health center

Midwife’s app
Midwife records pregnancy data and vital measurement on her mobile.
- Offline data collection
- Update patient records

Doctor’s app
Doctor reviews patient information - anytime, anywhere
- Remote viewing of reports
- Remote viewing of patient information

The power of timely information

MOM web portal
Midwife registers pregnant woman. Resident doctor reviews data and ultrasound reports.
- Patient registration
- Record examinations, investigations, management, and delivery details
- Generation of reports
Mobile Obstetrics Monitoring solution includes several components

<table>
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<tr>
<th>MOM software</th>
<th>Community worker backpack</th>
<th>VISIQ ultrasound</th>
<th>Clinical partner</th>
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<tbody>
<tr>
<td>MOM allows community caregivers and physicians to jointly review and manage each case</td>
<td>Allows data collection at patient's home using weighing scale, fetal Doppler, blood pressure apparatus, thermometer, tests for urine protein, hemoglobin level, blood glucose</td>
<td>Simple and mobile, quick to learn and use, with easy integration of images with MOM</td>
<td>Facilitates effective adoption of MOM and provides clinical training to the users</td>
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MOM has already demonstrated its capabilities*

**Case Study: Padang, West Sumatra, Indonesia, 2014**

**Key challenge: high MMR**

MMR in Indonesia: 190/100,000 live births

The World Health Organization states that pregnancy-related deaths can be avoided with better access to antenatal care.

The MOM pilot monitored 656 women for one year in Padang and delivered positive results; rewarded by Frost & Sullivan Excellence Award in 2015.

**Key interventions**

- MOM software solution
- Antenatal ultrasound
- Team of clinicians to manage care – midwives and doctors
- Care worker kit to capture vitals during home visits

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**Number of maternal deaths**

<table>
<thead>
<tr>
<th>Year</th>
<th>Number of Maternal Deaths</th>
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<tr>
<td>2014 Pilot</td>
<td>0</td>
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**Zero maternal deaths** during the 2014 pilot with risk identification, timely referral, and management using the MOM solution.

**Patients having mild to severe anemia**

- 420 patients in first trimester
- 6 patients in third trimester

**99% reduction in anemia** from first to third trimester through enhanced patient management.

**Detection of very-high-risk pregnancies**

- Without MOM: 5%
- With MOM: 17%

**3X increase in detection** of very-high-risk pregnancies during the pilot.

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Challenges on the ground

1. Resistance to use of new technology
2. Poor infrastructure: power backup and internet connectivity
3. Lack of trained sonographer at the primary health facility
4. High patient volumes at primary health centers
Future product roadmap & target geographies

**Product Roadmap**

1. Expand scope to include post-partum tracking of mother & baby (1000 day)
2. Introduce mother’s app for educational & nutrition content sharing
3. Analytics for population health management

**Target geographies for scaling the solution**

1. Indonesia
2. Africa (Kenya, South Africa, DRC, Ethiopia, Mozambique, Zambia, Uganda)
3. Myanmar
4. India
5. Russia
6. Other APAC countries
Q & A
• **Partnerships & Collective Action Award** honors two or more companies working together, or a company working w/ multi-sector partners, to address health challenges. When working together towards a shared goal, partnerships that capitalize on the core business strengths of each corporate participant have an even greater impact.

• **Workplace/Workforce Engagement Award** recognizes a corporate workplace program that is continuing to evolve by integrating new approaches, health issues and leaders to more effectively protect and improve the health and well-being of their employees.

• **Community Investment: Health Security Award** highlights the importance of strengthening local health systems through community engagement, infrastructure development, and integration in order to establish systems that are able to prevent and/or rapidly detect and respond to outbreaks now and in the future.

Applications Due August 3, 2016.
Contact awards@gbchealth.org for more information.
Thank you!