

Role of the **private sector** in addressing the dual disease burden

Dialogue event: Non-communicable, infectious, and environmental disease interfaces: challenges and opportunities for research and intervention in Vietnam

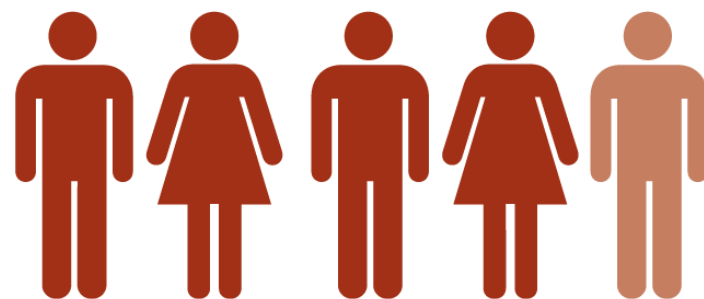
Ann Aerts, Hanoi, Vietnam, March 24, 2015



80% of the global NCD burden occurs in LMICs



NCDs are rising faster than the decline of infectious diseases and MCH

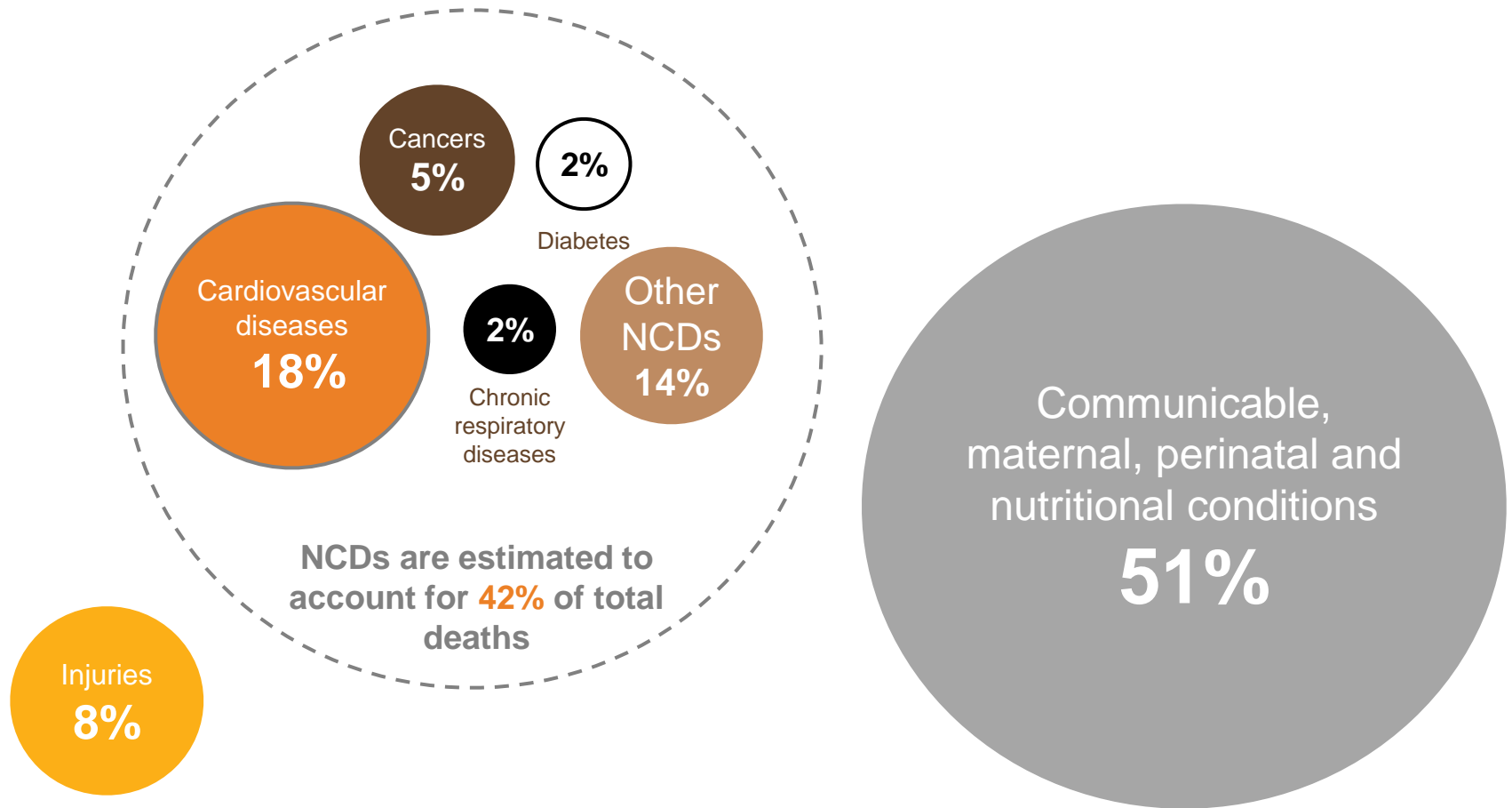


Four out of five deaths from non-communicable diseases (NCDs) worldwide are in low- and middle-income countries (LMICs)

Source: World Health Organization (2015) *Global Status Report on non-communicable diseases 2014*

Yet, the MDG-agenda remains unfinished

The example of Ghana – NCDs account for 42% of total deaths



Source: World Health Organization (2014) *Non-communicable Diseases (NCD) Country Profiles*, Ghana.

Private sector role in addressing dual burden in LMICs

Agenda

- **The situation** – The current global health challenge at a cross-road
- **The problem** – Existing health systems insufficiently equipped to face this overwhelming dual burden
- **The solution and its benefits** – Share expertise between public and private sectors to innovate delivery of care and build evidence of what works
- **Conclusion**

The scale of the global health challenge





Now is the time to act and prevent a global health crisis

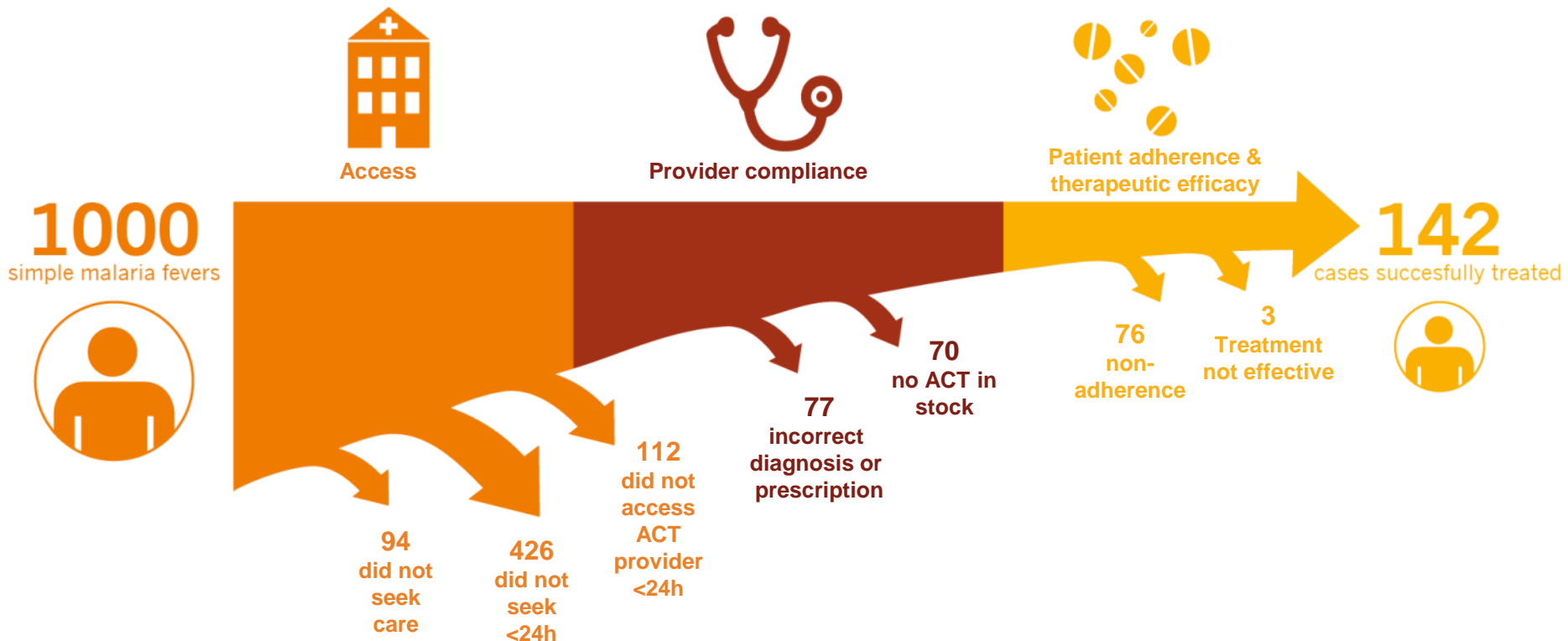
But what is the **solution**?



Access barriers in LMICs

Only a small proportion of patients benefit from high quality drugs

System effectiveness of artemether-lumefantrine in Tanzania

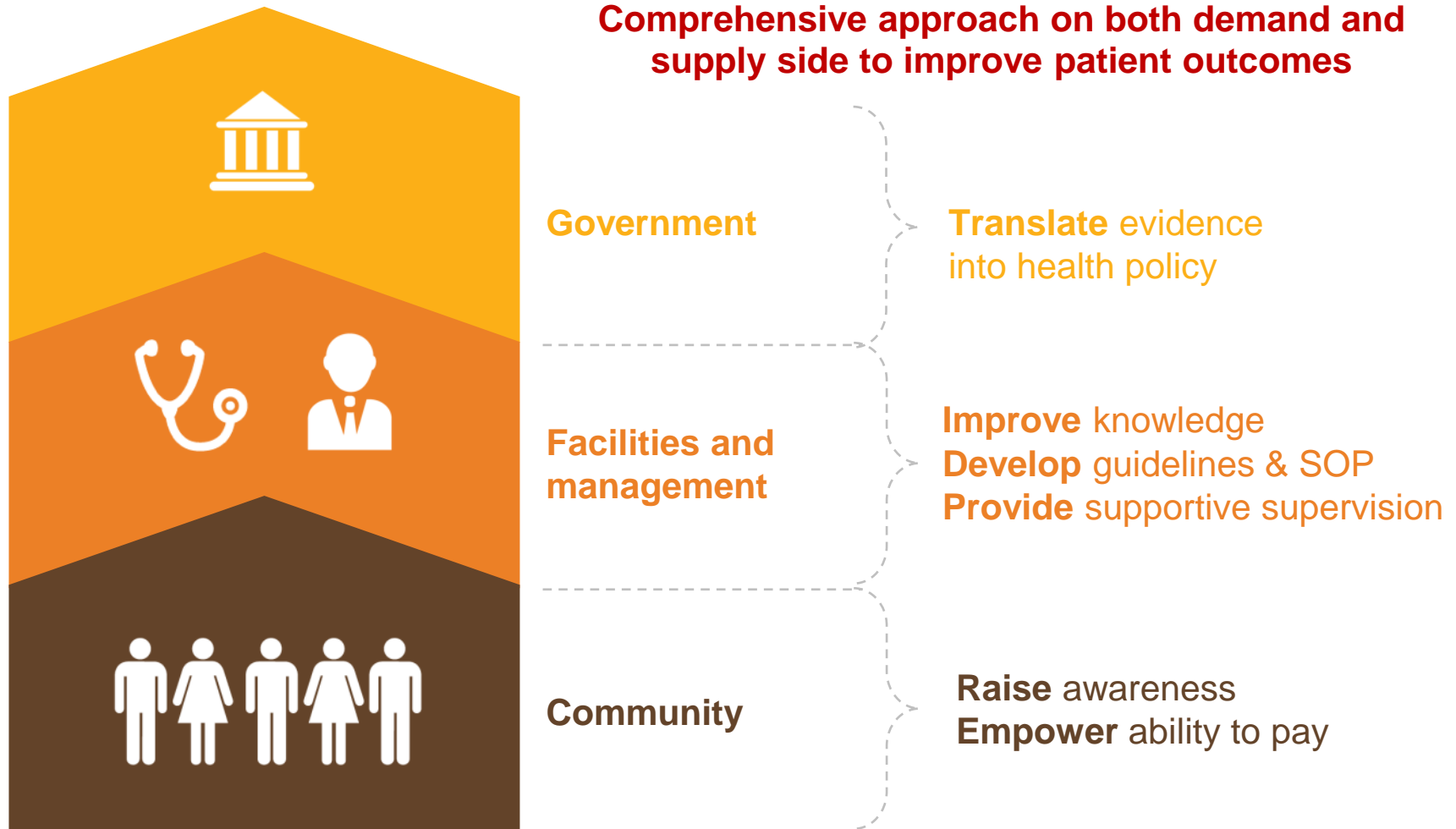


Source: ALIVE / Kabanywany *et al.* in prep.

How do we address these barriers?

The classic way – experience from ACCESS Tanzania

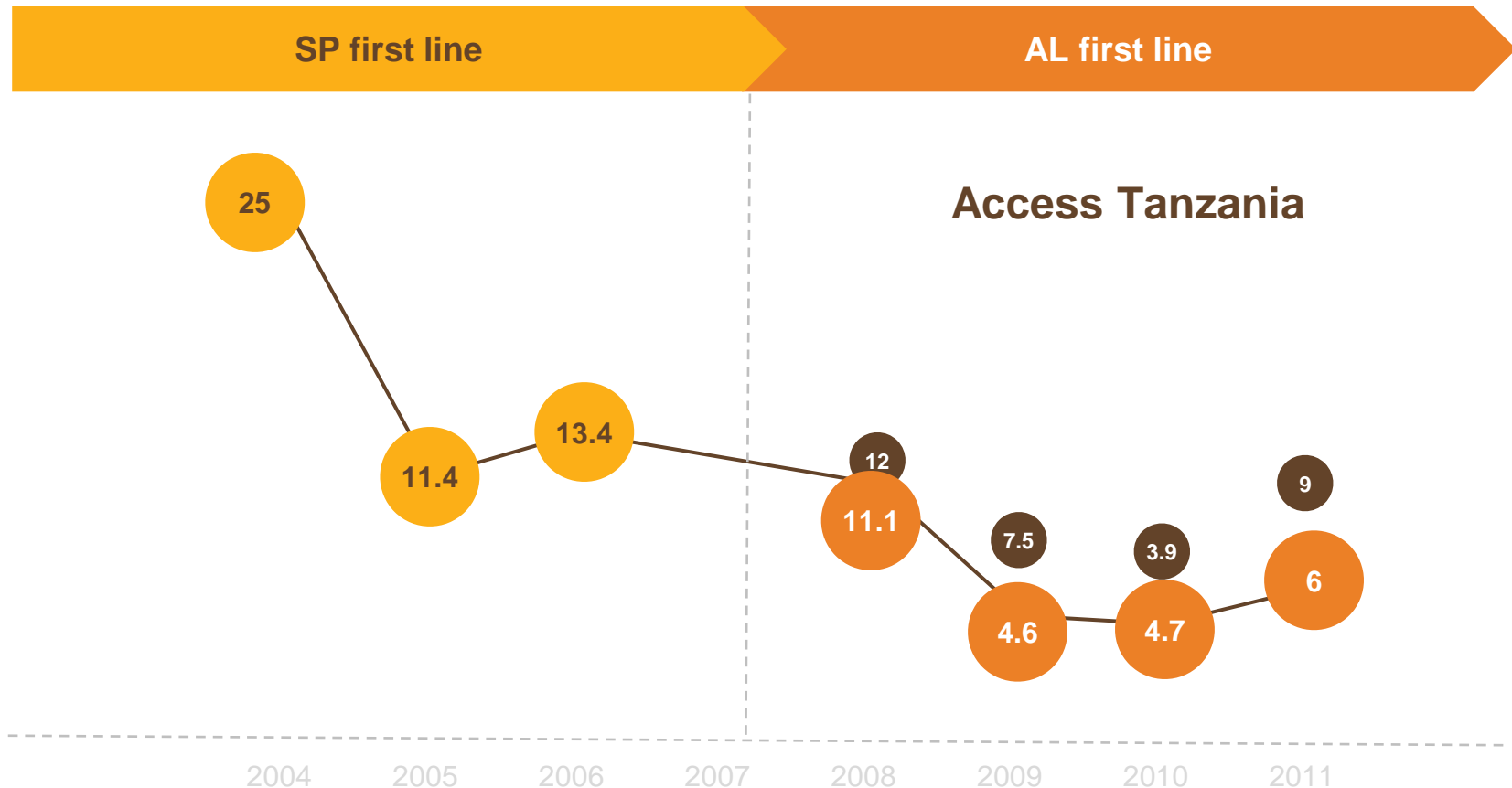
Comprehensive approach on both demand and supply side to improve patient outcomes



Transformational impact of ACCESS

90% reduction malaria parasitemia and 15% reduction under-five mortality

Children 1-59 months, N>35,000



- Asexual parasite prevalence (%)
- Antigenemia prevalence (HRP-2 by mRDT)(%)

Source: ALIVE / Kabanyanyi *et al.* in prep.

So what role can the private sector play?



A close-up photograph of a sparkler in full bloom. The central point of ignition is a bright, intense white-yellow light, from which hundreds of thin, golden-yellow sparks radiate outwards in all directions. The sparks are captured in motion, creating a sense of dynamic energy and light trails. The background is a deep, dark black, which makes the bright sparks stand out prominently. The overall effect is one of a powerful, transformative spark.

**Spark real change by
catalyzing innovative
healthcare models**



Share in the risk

We can take on some of the risk associated with developing and implementing pioneering models of healthcare



Leverage expertise

- We have a **wealth of expertise** – both within the Foundation and within our parent company Novartis
- We want to **share this knowledge and expertise** with our global health partners
- Be it business acumen; systems planning; financial management; human resources; communications; or marketing
- We can provide **specialist support where it is needed most**

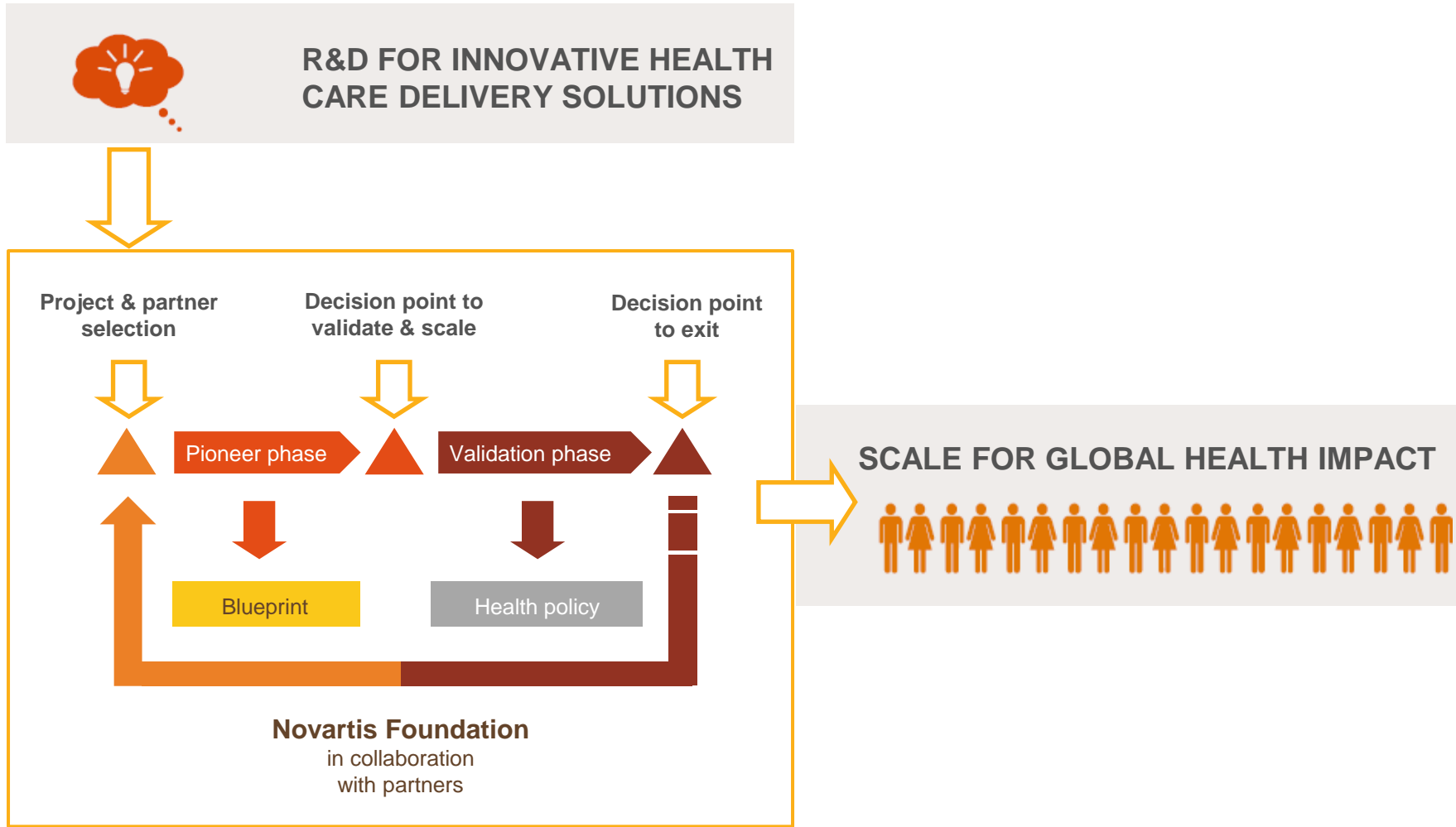
Drive scale and scope



If a new model of care is successful, we work with our partners to bring it to scale and transfer it to other nations

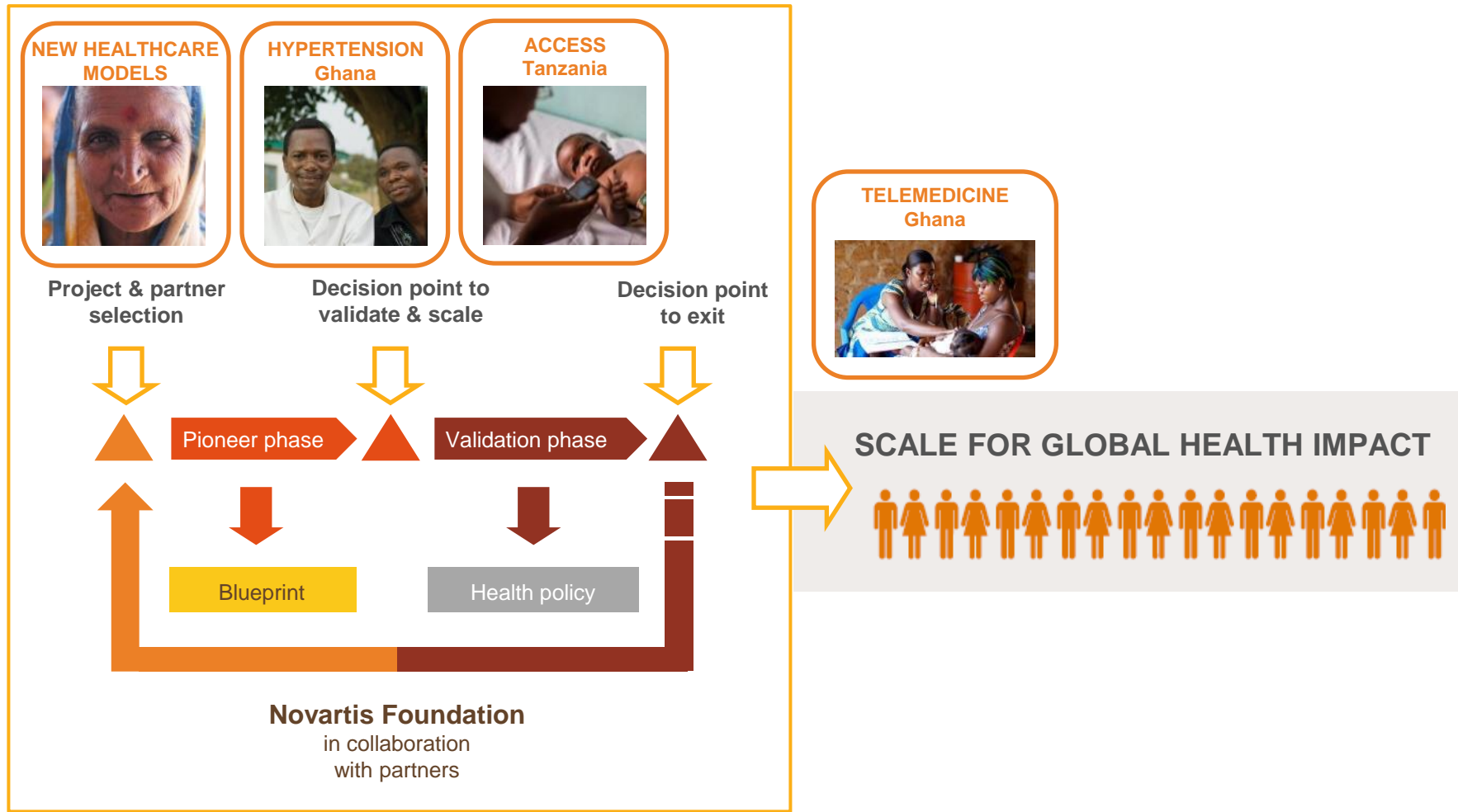
Current working model of the Novartis Foundation

Partnering to pioneer blueprints



Blueprints improving health outcomes

Examples at different stages of development and implementation



A woman in traditional Ghanaian attire, including a green top and a patterned wrap, is walking on a dirt path in a rural village. The scene is set at sunset, with the sun low in the sky, creating a warm, golden glow and long shadows. To the left, there is a traditional mud-brick building with a thatched roof. The background shows more trees and a dirt path leading into the distance.

What is the Novartis Foundation
doing in **Ghana**?

One third of all deaths worldwide are caused by cardiovascular diseases



Source: World Health Organization (2015) *Global Status Report on non-communicable diseases 2014*

NCDs in Ghana



Current tobacco smoking (2011) = 10%



Raised blood pressure (2008) = 27.3%



Obesity (2008) = 7.5%

The probability of dying from the four main NCDs is 20%
between age 30-70y

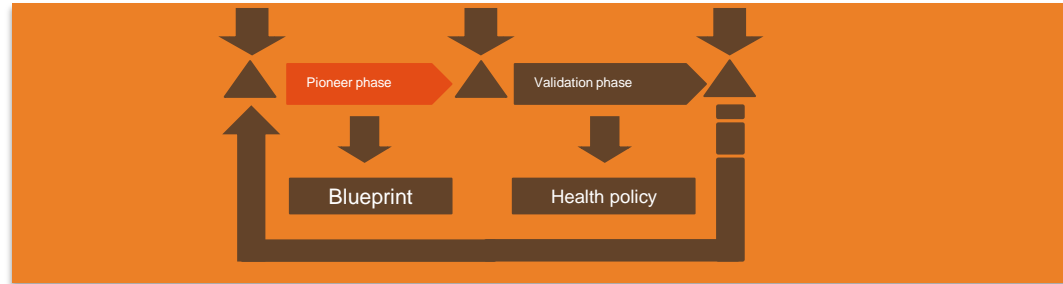
Ref: WHO. Noncommunicable diseases country profiles 2014.



We are **working with our partners** (FHI360, LSHTM and Ghana Health Service, Ministry of Health and School of Public Health) to pioneer an innovative way to manage hypertension in urban populations

Innovative model to address hypertension

Through patient empowerment, using digital technology & pharmacies



GOALS

- Address burden of hypertension in urban Ghana
- Understand the cost-effectiveness of a chronic disease management model that disrupts the healthcare system

OBJECTIVES

- Improve awareness and detection of hypertension within the urban community
- Increase patient-engagement in self-management of hypertension
- Strengthen secondary care for CV-complications
- Extend ability of private pharmacies to support management of hypertension
- Extend ability of the Ghana Health Services to manage hypertension and its complications

How is the Novartis Foundation supporting the project?



Providing funding



**Providing input on Technical Steering Committee
(establishing research design, clinical guidelines and
evaluation protocol)**



**Sharing knowledge and business expertise with partners
where needed**



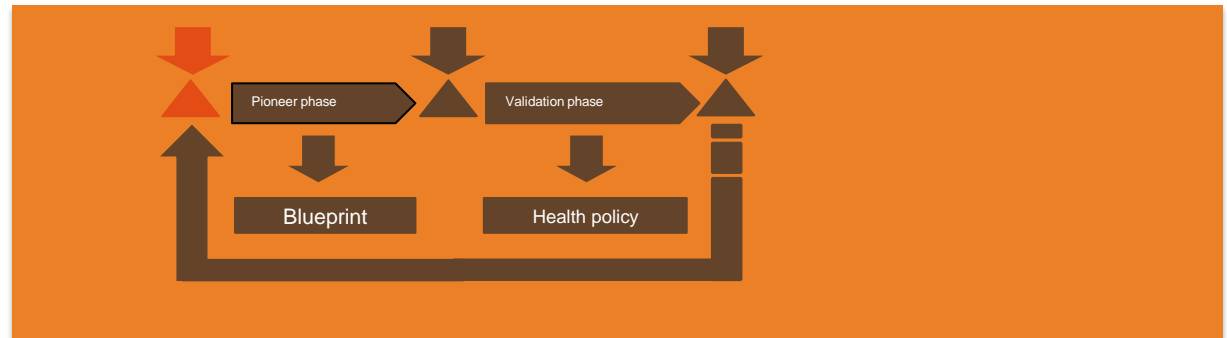
**Contributing to analysis, documentation, and dissemination of
results**



What next?

Novartis Foundation current call for proposals

To identify innovative healthcare models in urban settings



Purpose

Identify innovative health service models aiming to improve health outcomes at scale, for patients in urban settings

Disease target

Dual disease burden with a priority focus on cardiovascular disease and its risk factors

Scale

Aiming for impact at scale – using metrics for outcomes from proof of concept, the scalability and the sustainability

Geography/ duration

Geographic focus: ultimately on 3 continents
Setting: urban and semi-urban
Timeframe: at least 3-5 Years

So what does a **successful** private-public partnership look like?



Collaboration and co-creation

- Of **innovative delivery**, not just the delivery of innovation
- **Tailored** to the local context, **owned by local partners**
- **Driven** by cross-sector partnerships
- Built on **evidence**, to then generate new evidence
- Delivering models of care that are **scalable** and **transferrable**





What do we expect to see?

Our aim for this Dialogue Event

- That you decide today that the necessary innovation to address the dual burden of disease lies in new ways to deliver health services
- That you feel inspired to participate in the co-creation of new models and interventions addressing the dual burden of disease in Vietnam

Thank you!

