Teaching Global Health Through an Interprofessional Lens

Moderated by: Jessica Evert, MD
Executive Director, Child Family Health International (CFHI)
Assistant Clinical Professor, UCSF Department of Family and Community Medicine
Affiliate Faculty, UCSF Global Health Sciences
Chair, CUGH
Competency Sub-Committee

Child Family Health International
Consortium of Universities for Global Health
Goals of the Webinar Series

Equip faculty to integrate other disciplines approaches to Global Health in their courses and programs.

Present vocabulary, concepts and approaches that disciplines use when engaging in Global Heath.

Provide case studies on how disciplines have approached Global Health challenges and contributed to understanding and addressing Health Disparities.
Global Health & Law
Virginia Rowthorn JD LLM
University of Maryland

Global Health & Anthropology
Peter Brown PhD
Emory University

Global Health & Engineering
Shannon Marquez MPH PhD
Drexel University
Past Events

Minority Serving Institutions (MSIs) and Global Health

CUGH is joining the Center for Health, Environment, and Justice in hosting a trailblazing webinar on Minority Serving Institutions (MSI) and global health. This webinar will provide the academic community, MSIs, global health centers, faculty, and practitioners with important insights into the contributions MSIs bring to global health and that global health brings to MSIs.

Tuesday, January 24, 2017 -
1:00pm to 2:00pm
▶ Read more

CUGH Webinar: Global Health and Anthropology

Webinar - Faculty Development Series - GLOBAL HEALTH & ANTHROPOLOGY

from CUGH
Argentina • Bolivia • Ecuador • India • Mexico • South Africa • Uganda • Ghana • Philippines • Tanzania

cfhi.org

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CHANGE you
As a Strategic Advisor at UCSF's Institute for Global Health Sciences, Amy Lockwood supports strategy, business development, and operations for the AIDS Research Institute and Global Health Delivery and Diplomacy. She is also helps lead work at Born Free Africa, private sector-led initiative with the sole objective of accelerating progress towards the elimination of mother-to-child transmission of HIV. She is a Lecturer at the University of Global Health Equity in Rwanda and serves on the Board of WeRobotics, a global network of robotics labs that accelerate the impact of aid and development efforts. Concurrently, Amy is pursuing her PhD in Global Health Sciences at UCSF, with research driven by the hypothesis that there is a causal link between the quality of leadership and management of global health programs and health outcomes with the long-term goal to develop materials to teach global health professionals leadership skills and advocate for changes in the way that global health programs are managed and funded.

Ms. Lockwood has background spanning the business, non-profit and academic sectors. She has experience developing strategies, managing, and evaluating development projects and organizations throughout Africa, Asia and Latin America. Previously, she was the Deputy Director of the Center for Innovation in Global Health at Stanford, the Executive Director of Project Healthy Children (an NGO focused on micronutrient malnutrition), and the Director of the Pediatric HIV/AIDS Program and India Deputy Country Director for the Clinton Foundation. Prior to work in global health, she was a strategy consultant with a specialty in branding and communication. In addition to her current doctoral work at UCSF pursuing a PhD in Global Health Sciences, Ms. Lockwood holds a MBA from Stanford, a BS in Communications and a MS in Marketing, both from Northwestern University.
Kara Palamountain is a Research Associate Professor at the Kellogg School of Management (KSM). Her primary area of interest is the development and adoption of medical technologies in Africa. She has collaborated with a number of organizations, including commercial diagnostic companies, the Bill & Melinda Gates Foundation, the National Institute for Health, USAID’s Center for Accelerating Impact and Innovation, Johns Hopkins School of Public Health, Makerere University (Uganda), Mbarara University of Science and Technology (Uganda), University of Ibadan (Nigeria), University of Lagos (Nigeria), FIND, and Rice University (US). She has authored numerous publications in peer-reviewed journals, including PLOS One, Journal of Infectious Diseases, and Diagnostics.
WHAT DO WE MEAN BY “BUSINESS”?

business /ˈbɪznəs/ (noun)

The activity of making, buying, or selling goods or providing services in exchange for money

In global health, business is sometimes used to mean private-sector and often that means an organization or activity with a profit motive

However, some business principles and private-sector strategies can be used without a profit-motive by NGOs, foundations, and other organizations
THE ROLE OF BUSINESS IN GLOBAL HEALTH
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The Global Fund
To Fight AIDS, Tuberculosis and Malaria

Unitaid
Innovation in Global Health

Acumen
Changing the Way the World Tackles Poverty

The World Bank

Bill & Melinda Gates Foundation
THE ROLE OF BUSINESS IN GLOBAL HEALTH
A GLOBAL HEALTH BUSINESS IS COMPLICATED

Multiple stakeholders—patients, providers, payers—with distinct yet overlapping interests

A variety of regulations and requirements imposed by each government and sometimes specific to particular healthcare providers

Diverse geographies, each with different infrastructure, customs, and market dynamics

Limited resources—financial, physical, and human—that impact requirements for pricing and collaboration
KEY CHALLENGES TO CONSIDER

- Identifying and validating needs
- Understanding market and stakeholder dynamics
- Getting to a market ready product or service
- Defining a viable business model
- Securing adequate funding
- Sales, marketing, and distribution
CRITICAL HEALTH INTERVENTIONS HAVE FACED SLOW UPTAKE & LOW COVERAGE

Source: Bill & Melinda Gates Foundation
# CII’S IDEA TO IMPACT SERIES

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<td>Identifies priority activities and provides project management oversight across four stages of the product development continuum to help practitioners think through, plan, and execute on delivery-related activities</td>
<td>Supports practitioners in selecting initial launch country(ies) and creating a comprehensive strategy and operational launch plan to achieve scale</td>
<td>Provides organizational guidance for innovators in selecting the most relevant business model and partnership options to be best positioned to scale</td>
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<td>Social entrepreneurs, innovators, implementers, and funders who are developing and launching a global health innovation</td>
<td>Social entrepreneurs, innovators, implementers, and funders ready to pivot from product development to actual introduction into a given geography</td>
<td>Social entrepreneurs and innovators building an organization and/or partnering in preparation for launch and scale</td>
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1.4M infants born to HIV positive mothers each year
90% in 20 countries where transmission rates from mother-to-child (MTCT) is ~17%
Without diagnosis, 45% die in 1st year, 59% die in 2nd year
Only 35% access to testing
Only 17.5% receive test results
Potential for 115K lives saved per year in 20 countries with high MTCT

36% of all neonatal mortality caused by infection
36% of infection caused by infection of the umbilical cord stump
Chlorhexidine has demonstrated 20-40% reduction in neonatal mortality in countries with high neonatal mortality rates
Potential for 315K lives saved per year in 24 countries with high neonatal mortality rates
INITIAL COUNTRY SELECTION - CHLORHEXIDINE

Source: DHS data. Analysis adapted by Center for Accelerating Innovation and Impact (CII) across 24 priority countries (Afghanistan and S.Sudan not shown)
COUNTRY VISITS - LYNX
COUNTRY VISITS

Who are the key stakeholders in this country?

What roles do these stakeholders play in the commercialization process?

What do key stakeholders think of my product?
# Country Visit Preparation

## Approval
- What international regulatory approvals are required / preferred?
- What sort of local pilots / evaluation / licensing / registration is required? Who does this? Who pays for this?
- What prompts a change in the diagnostic tests recommended in Swaziland’s clinical guidelines?

## Procurement
- What is the concentration of lab consumable and/or equipment customers in Swaziland?
- What is the budgeting / forecasting and / or tender process for lab consumables and /or equipment in Swaziland?
- How frequently are lab consumables and equipment ordered / paid for with the manufacturer?
- Are imported lab consumable and equipment taxed?

## Distribution
- What is the concentration of government versus private distributors in Swaziland?
- What incentives are in place for distributors of lab consumables and equipment?
- Are there shelf-life requirements for lab consumables?

## Service & Maintenance
- How is service & maintenance on lab equipment identified, resolved and financed?
- Does Swaziland place restrictions on the exchange of inoperative equipment?

## Training Personnel
- Who provides / finances initial product training?
- Who provides / finances ongoing product training?
- What are the innovative diagnostic test training programs in Swaziland?
COUNTRY VISIT RESULTS

Approval

- WHO Prequalification or FDA Approval
- In-Country Pilot Testing or Pilot Results from South Africa

Procurement

- Approval
- Specification Driven Procurement Tender
- Request For Procurement Quote
- Direct Procurement Tender
- MOH Central Warehouse Receives Shipment
- Sample Transport System distributes to Clinics and Hospitals

Distribution

- Ministry of Health
- NHLS
- WHO
- FDA
- National Department of Health
- Pilot clinics/hospitals
- NGOs
- Ministry of Health
- NHLS
- National Emergency Response Council on HIV and AIDS (NERCHA)
- The Global Fund
- Clinics/Hospitals/Labs
- NGOs
- Ministry of Health
- NHLS
- Local distributors
- Clinics/Hospitals/Labs
- NGOs
The NHLS loved the single dose buffer and believed it would eliminate potential for error.

The possibility of p24 antigen testing & the plasma separator was new and exciting for the stakeholders.

Most stakeholders were pleased with it's size, portability and price.

Some concerns around overall testing time and complexity of steps.

Because the test is qualitative, there were concerns around quality control and accuracy of results.
Recap of the product vision and country selection:

For [product name], [country name], prioritized based on [product vision and rationale for country].

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<th>Key stakeholders</th>
<th>Key barriers to scale</th>
<th>Key launch activities across the five core components of scale-up</th>
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Market size

Potential interventions to overcome these barriers

See page 27, Market Assessment Tool, RSL

See page 25, Stakeholder Mapping Tool, RSL

See page 25, Intervention Design Tool, RSL

See page 28, Barrier Assessment Tool, RSL

See page 42, Operational Launch Plan Tool, RSL

Scale-up targets

Key indicators

Answers can be worked out from Step 1 of Ready, Set, Launch

Answers can be worked out from Step 2 of Ready, Set, Launch

Answers can be worked out from Step 3 of Ready, Set, Launch
FACILITY SALES & DISTRIBUTION
FACILITY WORKFLOW
SYSTEM SALES & DISTRIBUTION
Phlebotomists are staffed in the mini labs. It is preferred that the phlebotomists do the point of care because they are trained.

Why not higher in the system?
- Higher throughput needed: LYNX would need to be able to process greater volume or process more quickly
- "Phlebotomists are staffed in the mini labs. It is preferred that the phlebotomists do the point of care because they are trained."

Why not lower in the system?
- Liability: NRL concerns with non-lab workers managing processes given potential liability
- "Nurses could be trained and might want to perform tests because they have an interest in infant HIV testing; however, it is more of a political battle."
CONNECTIVITY

LESSONS LEARNED

What is the investment case for people buying your product? Who is your biggest competitor? Why are you better?

What is the break even volume you need to remain sustainable? How do you hit this volume ASAP?

What countries do you target first to hit this volume?

What other products are in the same place and are used at the same time as your products?

What partners do you need?

What do partners need from you?
QUESTIONS & DISCUSSION

USE THE QUESTION BOX AT THE RIGHT HAND CONTROL PANEL