

PHARMACCESS CONTRIBUTION TO THE SUSTAINABLE DEVELOPMENT GOALS



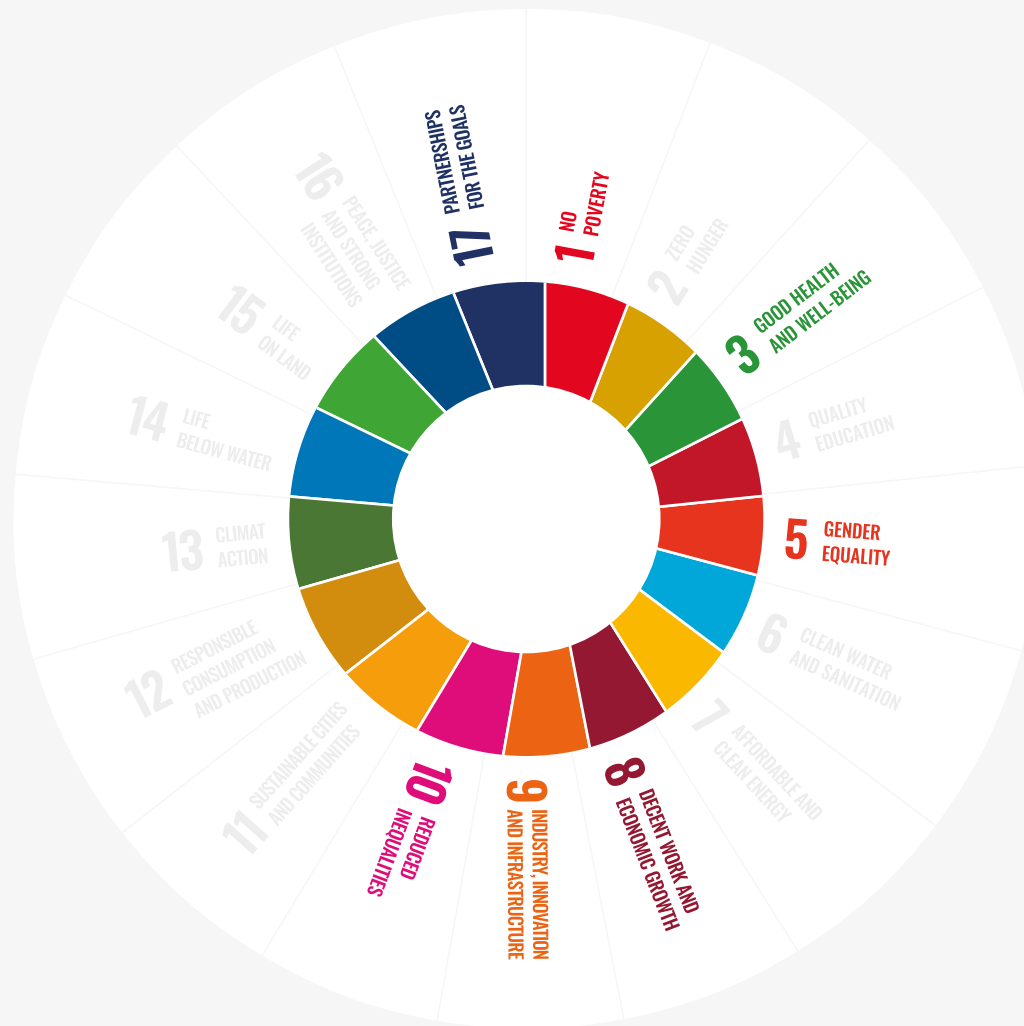
PHARMACCESSGROUP



PHARMACCESS CONTRIBUTION TO THE SUSTAINABLE DEVELOPMENT GOALS

The 2030 Agenda for Sustainable Development was adopted by all United Nations Member States in 2015 to provide a set of goals to end poverty, protect the planet and ensure prosperity for everyone. In partnership with the Ministry of Foreign Affairs of the Netherlands, PharmAccess contributes to these Sustainable Development Goals (SDG's) by working towards inclusive health markets in sub-Saharan Africa. By capitalizing on digital innovations, sustainable approaches and public-private partnerships, we help build stronger health markets that ensure millions of people in Africa can get access to healthcare and move out of poverty.

OUR PRIORITY SDGs



SUSTAINABLE DEVELOPMENT GOALS



SUSTAINABLE DEVELOPMENT GOALS

HOW TO MEASURE OUR IMPACT

Each SDG has underlying targets and sets of indicators*, that are the backbone of monitoring progress towards SDGs.

Listed on this page are the SDGs and indicators that are most relevant for the work of PharmAccess.



* The targets listed here are taken from the SDG-Tracker, a joint collaborative effort between researchers at the University of Oxford and the Global Change Data Lab.



NO POVERTY

- 1.3** Implement social protection systems
- 1.4** Equal rights to ownership, basic services, technology and economic resources
- 1.A** Mobilization of resources to end poverty



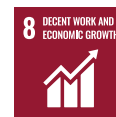
GOOD HEALTH

- 3.1** By 2030, reduce the global maternal mortality ratio to less than 70 per 100,000 live births.
- 3.2** End all preventable deaths under five years of age
- 3.3** Fight communicable diseases
- 3.4** Reduce mortality from non-communicable diseases and promote mental health
- 3.7** Universal access to sexual and reproductive care, family planning and education
- 3.8** Achieve Universal Health Coverage
- 3.b** Support research, development and universal access to affordable vaccines and medicines
- 3.C** Increase health financing and support health workforce in developing countries



GENDER EQUALITY

- 5.6** Universal access to reproductive rights and health
- 5.A** Equal rights to economic resources, property ownership and financial services
- 5.B** Promote empowerment of women through technology



GOOD JOBS AND ECONOMIC GROWTH

- 8.1** Sustainable Economic Growth
- 8.2** Diversify, innovate and upgrade for economic productivity
- 8.3** Promote policies to support job creation and growing enterprises
- 8.8** Protect labour rights and promote safe working environments
- 8.10** Universal access to banking, insurance and financial services



INDUSTRY, INNOVATION AND INFRASTRUCTURE

- 9.3** Increase access to financial services and markets
- 9.5** Enhance research and upgrade industrial technologies
- 9.A** Facilitate sustainable infrastructure development for developing countries



REDUCED INEQUALITIES

- 10.2** Promote universal social, economic and political inclusion
- 10.4** Adopt fiscal and social policies that promotes equality



PARTNERSHIPS FOR THE GOALS

- 17.3** Mobilize additional financial resources for developing countries from multiple sources
- 17.15** Respect national leadership to implement policies for the sustainable development goals
- 17.16** Enhance the global partnership for sustainable development
- 17.17** Encourage effective partnerships
- 17.18** Enhance availability of reliable data

SDG1

NO POVERTY



Globally each year, 100 million people are pushed into extreme poverty because of catastrophic health expenditures. Eradicating poverty requires the development of inclusive and sustainable means for **financing health**. PharmAccess helps local governments to develop and implement solidarity and pre-payment mechanisms and **mobilize public and private resources** for risk pools to **protect individuals** from those **financial shocks**, allowing them to seek healthcare when they need it, not only when they can afford it.

Mobile phone penetration among the poor in sub-Saharan Africa has created unprecedented opportunities to reach those who have been excluded from **basic services** at much lower costs. Mobile health payment platforms, such as M-TIBA (developed by CarePay in partnership with PharmAccess and Safaricom), empower individuals to take care of their families by **saving**, (co)-paying for health insurance and **receiving entitlements** for healthcare on their mobile phones. This opens the door to a more **equitable, efficient and transparent redistribution**

of resources, putting the power to purchase care directly in people's hands and leading to increased access to better care.

With over 40 percent of people still living on less than \$1.50 a day in sub-Saharan Africa, financial support in the form of remittances or subsidies is critical to helping them get out of poverty. To support those who are unable pay for healthcare, PharmAccess has developed HealthConnect, a peer-to-peer mobile donation platform that allows low-income families to **receive remittances** and donor funding for their health insurance premiums.

Assessing a household's socio-economic status enables **targeted subsidies** for health insurance as well as monitoring whether subsidies **reach those who struggle financially**. PharmAccess supports national governments in Ghana and Kenya in collecting data on households that give estimates of household income levels

Key targets

1.3 Implement social protection systems

1.4 Equal rights to ownership, basic services, technology and economic resources

1.A Mobilization of resources to end poverty

and help governments make more informed policy decisions to support low-income groups.

In order to understand and break behavioral barriers for low-income households towards saving for healthcare and participating in **health insurance** programs, we work with the Center for Advanced Hindsight at Duke University and implement findings to **improve saving and health seeking behavior**.



>4M people have registered on the mobile platform M-TIBA and can now save for health insurance, or receive entitlements for healthcare.

1M households in Kenya have taken a poverty assessment survey to identify who is eligible for subsidies.

Our interventions to **encourage saving behavior** led to **5X more women saving** for the next year's insurance premium.

SDG3

GOOD HEALTH
& WELL-BEING

Key targets

3.1 By 2030, reduce the global maternal mortality ratio to less than 70 per 100,000 live births.

3.2 End all preventable deaths under five years of age

3.3 Fight communicable diseases

3.4 Reduce mortality from non-communicable diseases and promote mental health

3.7 Universal access to sexual and reproductive care, family planning and education

3.8 Achieve Universal Health Coverage

3.b Support research, development and universal access to affordable vaccines and medicines

3.C Increase health financing and support health workforce in developing countries

The mandate to achieve **Universal Health Coverage (UHC)** by 2030 has spurred many governments to work towards health insurance for all. PharmAccess actively assists governments to achieve UHC by **strengthening primary care** and providing the technical assistance to develop and roll out sustainable (mobile) **health financing** models. Since 2007, PharmAccess has been developing pooled approaches and demonstrating with African partners, that health insurance is an effective approach for covering the healthcare expenses of low-income groups.

Poor quality of care remains a key barrier to reducing mortality and achieving UHC. By implementing recognized **quality standards** designed specifically for resource-restricted settings, quality can be increased and mortality reduced. SafeCare provides a unique, standards-based approach for measuring, improving and recognizing **the quality of healthcare services**. It equips healthcare providers with the tools and methodology to offer their patients better quality services.

To efficiently manage the rollout of UHC, PharmAccess advocates and supports the **use of mobile technology as an enabler to strengthen health financing models specifically for low-income groups**. Through M-TIBA, we connect payers (such as insurers, donors, governments), public and private healthcare providers and individual users so they can transact in real-time. With the data collected we advise on healthcare utilization and spending, disease prevalence and adherence to protocols, supporting efficient and transparent decision-making.

Everyone has a right to access healthcare according to their individual needs and condition. With Care Bundles, the **healthcare journeys of specific patient groups** (such as expectant mothers, HIV/AIDS and NCD patients) are organized through a digital contract. People can pay or receive entitlements for care through their mobile health wallet. The patient data is digitally available, allowing

medical staff to uncover and address disparities in the health journey and improve adherence to protocols. Care Bundles financially reward quality care, enabling payment based on performance.

To **improve access to healthcare for HIV/AIDS patients**, PharmAccess renovated 74 malfunctioning army facilities in Tanzania into fully functioning healthcare centers that are open for the entire population. The clinics, often based in rural areas, also provide treatment and care for a large list of other complications, as well as maternity care.



PharmAccess tested >1M adults and children for HIV in Tanzania with 21,000 patients receiving antiretroviral therapy in 2019.

>2.6 Kenyans are now covered and registered through the state owned National Hospital Insurance Fund, thanks to a partnership with PharmAccess and CarePay.

~1,150 healthcare facilities in sub-Saharan Africa hold a SafeCare quality certificate, and **>80% improved their quality score.**

SDG5

GENDER EQUALITY



Women and girls are excessively affected by a lack of access to information and education, economic opportunities and affordable and quality healthcare. PharmAccess capitalizes on community mobilization, mobile technology and health insurance to improve the wellbeing of girls and women and giving them better **access to sexual and reproductive health services**.

Community mobilization and traditional leadership are often key to addressing constraints that affect girls and women's access to healthcare. In Nigeria, PharmAccess works with the Emir of Shonga, a prominent Muslim leader, to train community leaders, promote social dialogue, enhance the decision-making skills of girls and women and improve health-seeking behavior and access to health insurance.

In Kenya, low-income women of reproductive age are enrolled in the **informal sector health insurance scheme** through a cross partnership program with Amref Flying Doctors,

called i-PUSH. Community Health Workers use digital tools for mobile learning, household mapping and continuous health education of women. The education helps the women to understand the importance of health insurance and how to save for healthcare, so they can become more financially independent.

Fragmented funding and market failures often result in vulnerable groups not accessing the care they need. The Care Bundle specifically designed for expectant mothers, MomCare, helps healthcare providers **measure the quality of care during the pregnancy journey** with real-time data, and increase the dialogue with the expectant mother. In turn, presenting payers with a confirmation that the woman's journey is being completed according to the nation's protocols and guidelines while giving mothers and babies a better start in life.

Women who own and run a healthcare facility are often unable to provide collateral because they do not have property rights. This is a key barrier

Key targets

5.6 Universal access to reproductive rights and health

5.A Equal rights to economic resources, property ownership and financial services

5.B Promote empowerment of women through technology

for female entrepreneurs in accessing the required financing needed to grow their healthcare businesses. The Medical Credit Fund (MCF) disburses digital '**collateral free**' loans to female entrepreneurs. With access to a loan within 48 hours, **women entrepreneurs receive access to financing** and can thus focus solely on growing their business.

>40% of MCF disbursed loans are digital and collateral-free, therefore equally accessible for all genders.

I-PUSH connects **>35,000 low-income women** and their families to healthcare financing, support and quality care directly through their mobile.



SDG8

DECENT WORK & ECONOMIC GROWTH



Key targets

- 8.1** Sustainable Economic Growth
- 8.2** Diversify, innovate and upgrade for economic productivity
- 8.3** Promote policies to support job creation and growing enterprises
- 8.8** Protect labour rights and promote safe working environments
- 8.10** Universal access to banking, insurance and financial services

While private healthcare providers remain the principle choice for the majority of the sub-Saharan population, including low-income groups, these providers struggle with accessing capital to expand their businesses and improve services. Health small and medium-sized enterprises (SMEs) in Africa are underbanked because of the perceived high risk due to a lack of banking history and limited collateral. Health SMEs range from primary health centers to maternity homes, dispensaries and smaller hospitals.

The Medical Credit Fund (MCF), the first and only impact investing initiative dedicated to addressing the barriers faced by health SMEs in sub-Saharan Africa, **supports sustainable economic growth**. MCF works with local banks to provide health SMEs access to loans for expansion and working capital, combined with technical assistance. This financing model leads to **job creation, increased access to banking and financial services** as well as **more investments** in the healthcare sector.

MCF's Receivable Finance product pre-finance health insurance claims in Ghana, helping healthcare providers **overcome temporary cash constraints**. Similarly, Cash Advance in Kenya is designed for health providers who do not qualify for regular bank financing and enables them to **access loans digitally** within 48 hours.

In addition, MCF offers capacity building and quality courses to help **healthcare businesses realize lasting improvements**. These courses combine business leadership, management and entrepreneurship in combination with unique healthcare modules.

The SafeCare standards and methodology enable healthcare facilities to monitor risk procedures and provide quality, reliable services. This not only enhances patient safety, but also promotes and helps achieve **a safe working environment for healthcare staff**.

MCF has disbursed **~3,950 loans** with a total value of **>65M USD** which were invested in **~1700 African health SMEs**.

>2,000 health facility staff have been trained by MCF and SafeCare to build their capacity for improving quality and increasing business growth.



SDG9

INDUSTRY,
INNOVATION AND
INFRASTRUCTURE

Inclusive digital financial services, such as mobile money, insurance and credit can enable the poor to become more financially resilient and lead them out of poverty.

To facilitate access to financial services to millions of people in sub-Saharan Africa, PharmAccess collaborates with Queen Máxima of the Netherlands, UN Secretary-General's Special Advocate for Inclusive Finance for Development. The work includes **advocacy for policy and legislation** that will enhance the implementation of mobile payment services and health insurance as well as advocating for state health insurance in Nigeria.

The steep uptake of **digital and mobile technologies** in sub-Saharan Africa offers countless **opportunities for innovation** by digitalizing interventions needed to make health markets work. Therefore, technological innovation is at the heart of our theory of change. With the support of partners we test and scale interventions.

To scale quality and **facilitate sustainable healthcare infrastructure**, we work closely with governments and licensing partners to institutionalize international quality standards. SafeCare uses, tests and implements digital tools to enable healthcare facilities to benchmark and track their own progress.

MCF **connects health SMEs to financial services** supporting their integration in value chains and markets. Together with local financial partners, MCF **reduces investment risks** for health SMEs by combining financing with technical assistance to improve the bankability of health SMEs and stimulate business and quality improvements, and drive private financing into the healthcare delivery infrastructure. It catalyzes investment from local financial markets and creates greater trust in the sector. With more affordable financing and the expectation of a reasonable return for investors, we deliver better healthcare for everyone.

Key targets

9.3 Increase access to financial services and markets

9.5 Enhance research and upgrade industrial technologies

9.A Facilitate sustainable infrastructure development for developing countries

With **scientific impact evaluation and operational research** core to our approach, we adopt learnings to improve intervention quality and advocate for proven, successful models. We work with both local and international researchers and **build African research capacity**. Our dedicated research programs help unearth the patterns of individuals accessing care to provide scientific evidence on innovations and evaluate data insights to better manage costs and quality of care.

Risk sharing between MCF and local financial partners is **>40%** and **97%** of loans are repaid.

Our focus on research has resulted in **10 PhD dissertations, 20 MSc theses and 90 peer-reviewed publications** focusing on healthcare solutions in Africa.



SDG10

REDUCED
INEQUALITIES

Key targets

10.2 Promote universal social, economic and political inclusion

10.4 Adopt fiscal and social policies that promotes equality

The negative consequences of disease burdens fall most heavily on the poorest segments of the population. Health insurance is a cost-effective way to protect populations both medically and socio-economically and to **reduce inequalities**. Transitioning from out-of-pocket payments to risk pooling **increases solidarity** and reduces risks and costs for society as a whole.

Supporting Kwara State in the design and implementation of a state health insurance plan has demonstrated that a state-based health plan can deliver a decent basic healthcare coverage for 28 USD per person per year. The program in Kwara has become a blueprint for and contributed to **policy shifts on health financing**, leading to the adoption of further mandatory state **health insurance laws** across many states in Nigeria.

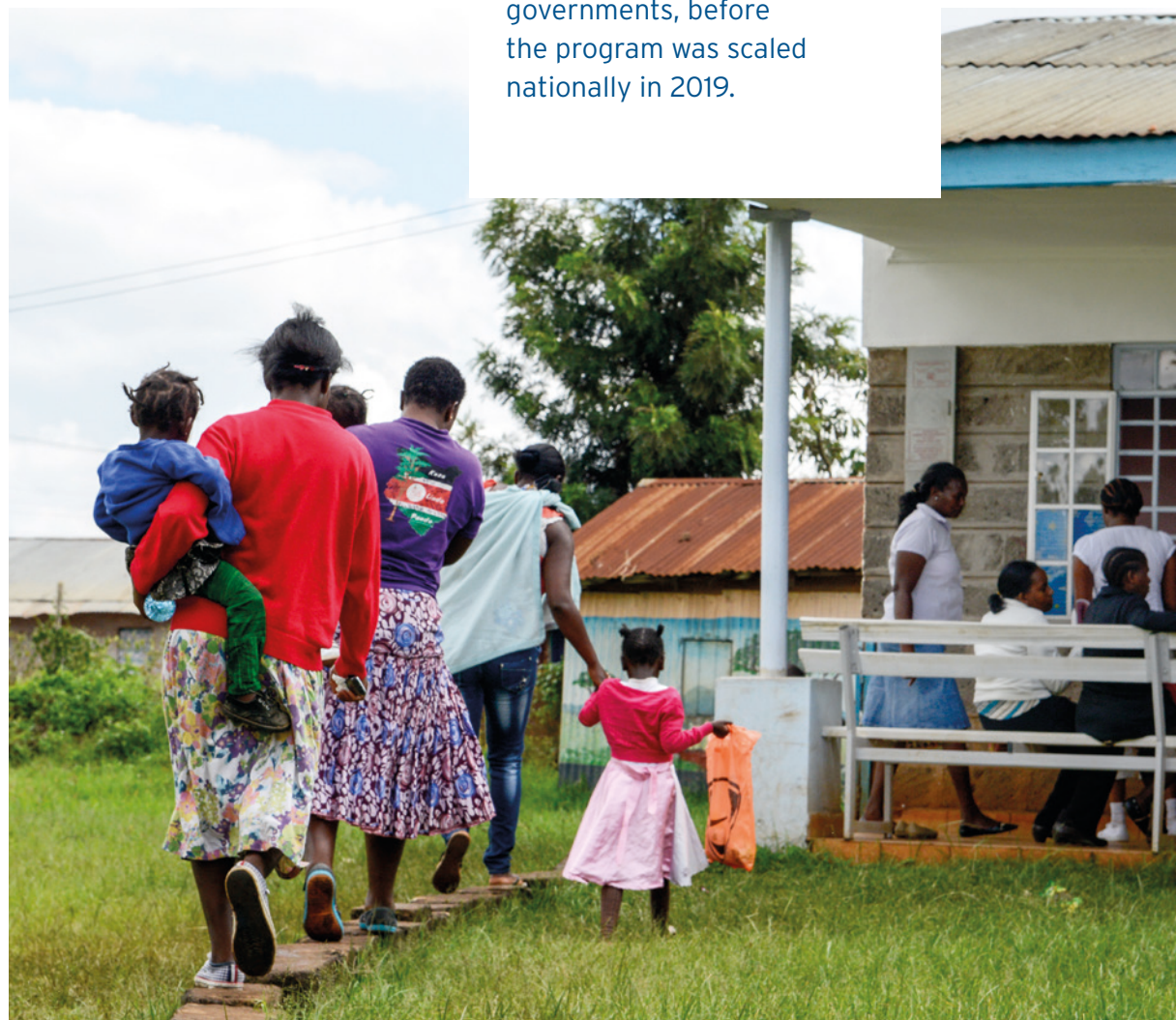
In Northern Tanzania, in partnership with the National Health Insurance Fund (NHIF) and district councils, PharmAccess designed and implemented a health insurance

program to include rural and low-income households. The program aimed to **protect these households against the financial impacts** of adverse health events and to improve healthcare services. Paving the way for the adoption of a **new national health financing bill** and the introduction of a nationwide health insurance model by the Government of Tanzania.

To estimate individual poverty levels, we link mobile phone, consumption and transaction **data to determine who qualifies for health insurance subsidies**.

Tailoring and adapting solutions for resource-restricted regions results in increased access for patients from low-income groups to services they can trust. SafeCare bridges the gap between international standards and the local context, so healthcare providers can strive to improve and deliver safer, quality-secured care. With SafeCare, we also advocate for policies that achieve **greater equality in healthcare access and utilization**.

>670,000 low-income Tanzanians were enrolled into iCHF, a health insurance scheme started by PharmAccess, Tanzanian National Health Insurance Fund (NHIF) and two district governments, before the program was scaled nationally in 2019.



SDG17

PARTNERSHIPS
FOR THE GOALS

Professor Joep Lange founded PharmAccess in 2001 with the objective of turning groundbreaking scientific research on triple combination drug therapy into action by bringing HIV/AIDS treatment to places where it was unavailable. He joined forces and founded an **effective partnership** with pharma companies, multinationals and local insurance companies to set up and pay for the first ever HIV workplace programs for their employees and dependents in multiple African countries.

Public-private partnerships as well as cooperation between NGO's is essential to achieve UHC. We work with banks to provide loans to SMEs, with telecom companies to provide mobile health solutions, and with pharma to design and test innovative programs.

Our partnerships with pharmaceutical companies such as Sanofi, Pfizer and Boehringer Ingelheim have led to an innovative approach for low-income patients with NCD's like hypertension and diabetes in Kenya, to access care via a mobile health platform.

In Ghana, partnerships with pharmaceutical distributors and the Christian Health Association of Ghana (CHAG) resulted in the launch of Med4All, a platform that creates **transparency in the medicine supply chain**, addressing the wide-scale problem of inflated prices as well as fake and sub-standard-quality medicine distribution.

In 2019, PharmAccess signed a **partnership agreement with the Global Fund** to improve healthcare systems and deliver better and more inclusive care for HIV, TB and malaria patients by leveraging the potential of mobile technology.

To **scale sustainable healthcare financing models**, our close **engagements with local governments** is key. We work with governments, such as Lagos state in Nigeria, to enroll their populations on mobile health platforms and facilitate the implementation of their mandatory health schemes.

Through HealthConnect, we **mobilize additional financial resources for**

Key targets

17.3 Mobilize additional financial resources for developing countries from multiple sources

17.15 Respect national leadership to implement policies for the sustainable development goals

17.16 Enhance the global partnership for sustainable development

17.17 Encourage effective partnerships

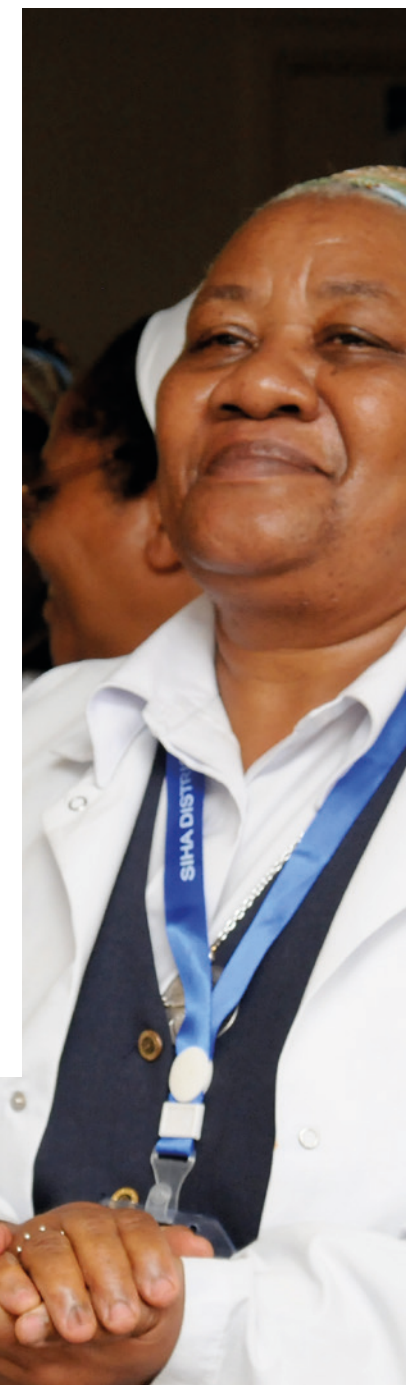
17.18 Enhance availability of reliable data

developing countries. HealthConnect enables, among others, the Nigerian **diaspora community to pay** health insurance premiums for their loved ones in Nigeria. It connects to a **sustainable source of funding** by tapping into the ~USD 24 billion that flows each year from the Nigerian diaspora into the country and makes it available for healthcare.

The amount of funds available for health in Africa is growing as a result of increased digitization and smartphone usage. Data processing and analyzing capacities have grown exponentially and are already starting to transform healthcare. Membership data, healthcare utilization and outcome data can be used to improve the management of funds and diseases while offering much-needed market transparency. We assist governments and payers with **data-based insights** for decision-making, increasing the value of available funds and improving the allocation of resources.

Our collaboration with states across Nigeria has transformed health-financing policy for **>200M Nigerians**. With **30 states adopting laws to provide health insurance** for all.

PharmAccess works with **>100 international and local partners** in the public and private sector.



WHO ARE WE?

PHARMACCESSGROUP

PharmAccess

PharmAccess is a group of organizations dedicated to improving healthcare. With a focus on sub-Saharan Africa, we work on strengthening health markets with digital technologies so that people can access better services, lead healthier lives and reach their full potential. Our work echoes the global call for universal health coverage, and we do this by mobilizing private and public resources, to reach those in even the most remote areas with affordable healthcare they can trust.



Medical Credit Fund (MCF)

Medical Credit Fund is the only dedicated fund supporting health SMEs in Africa. MCF works with a range of partners to help private healthcare clinics access affordable finance and support to improve the quality of healthcare they deliver.



SafeCare

Healthcare providers in emerging countries often struggle with patient safety, quality demands and have limited data and insights on overall quality. SafeCare empowers their progress by helping them measure, monitor and improve their services using innovative solutions. SafeCare is accredited by the International Society for Quality in Healthcare (ISQua).

KEY PARTNER PROGRAMS AND PRODUCTS



CarePay Platform/M-TIBA in Kenya

CarePay uses digital technology to connect individuals, insurers, donors, governments and healthcare providers, making healthcare more affordable, efficient and accessible. CarePay was initially established in Kenya with an investment from the M-PESA Foundation and the Investment Fund for Health in Africa (IFHA). In partnership with PharmAccess, CarePay has since connected over four million people and 1,000+ healthcare facilities to the M-TIBA platform.



I-PUSH

After winning the Dutch Postcode Lottery's Dream Fund in 2016, PharmAccess and Amref joined forces in an initiative called the Innovative Partnership for Universal Sustainable Healthcare (i-PUSH), which uses mobile technology to connect women on a low-income and of reproductive age and their families to health insurance and better quality care in Kenya.



Med4All

Med4All is a digital supply chain platform designed to improve the quality, access and affordability of medicines in Ghana. It is being established in partnership with the FDA, the Christian Health Association of Ghana and PharmAccess.

PHARMACCESS CONTRIBUTION TO THE SUSTAINABLE DEVELOPMENT GOALS

PHARMACCESSGROUP

PharmAccess
FOUNDATION

Health
Insurance
Fund



SafeCare
HEALTHCARE STANDARDS

Principle funders:



Ministry of Foreign Affairs of the
Netherlands

