



Philips
Foundation

ACCELERATING HEALTHCARE ACCESS

Participating Fellows



ASHOKA

OVERVIEW OF PARTICIPANTS

Sanjeev Arora
ECHO (Global impact)

Javier Lozano
Clínicas Del Azucar

Carlos Atencio
F. Medicina Familiar

Andres Rubiano Escobar
F. Meditech

Edith Grynszpancholc
FNDF

Amr El-Tayeb
SmartMed

Rita Melifonwu
Stroke Action Nigeria

Shona McDonald
Shonaquip & Uhambo

Abdelaziz Allabadi
ALTIBBI

Asher Hasan
Naya Jeevan / DoctHers

Armida Fernandez
SNEHA

Hilmi Quraishi
MIRA Channel

Prasanta Tripathy
Ekjut

DY Suharya
Alzheimer Indonesia

1 Global
4 LatAm
2 Africa SS
2 MENA
5 Asia

 FULL ADVISORY PROCES  REDUCED PROCESS

ABDELAZIZ & JALIL ALLABADI ALTIBBI



For many Arabic citizens, language is a key barrier to access affordable healthcare services. Abdelaziz is popularizing medical information in the Arab region by creating and publishing updated and authenticated Arabic medical content online.

Through this system, patients - from diverse socio-economic backgrounds - get free access to medical material which covers common relevant health topics such as dental problems, blood pressure, diabetes, eye diseases, skin disorders and sexual health. They provide specific videos which share accessible knowledge on health issues aimed at prevention and earlier detection. Moreover, they offer a free Q&A portal which engages with a comprehensive network of 9000 doctors and about 150 answering every day. Thanks to this approach, Altibbi provides healthcare services to people outside of the capital who don't have access to quality doctors, having currently 300,000 visitors a day, looking at about 1 million pages everyday.

Through their model, people with limited access to healthcare gain access to quality doctors within 40 seconds on average, with a reduced bill of around 40%. They also provide a 24-hour call service for a minimal charge, with 30 – 40,000 participants that have made use of the service so far.



Geographical scope

Jordan
Saudi Arabia
Egypt



Useful links

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AMR EL-TAYEB

SMARTMED (STARTED IN 2011)



Amr aims to ensure quality medical services to the +50% (50 million) of Egyptians with no access to health-care programs.

Through the creation of SmartMed, he's making the healthcare industry more inclusive while granting access to low-cost, self-managed, and personalized health care programs. SmartMed provides medical services through online support with a reliable network of doctors and service providers. They guarantee patients a call center service, follow-ups, medical records and chronic diseases management. By deploying this end-to-end solution, SmartMed results in high efficiency of health management, reducing medical financial costs among an important underserved segment of the population.

From its implementation, SmartMed has reached 40,000 customers, while impacting 120 different companies and developing three distinct branches (Greater Cairo, Alexandria and El Sharkeia) among the whole country. Amr's future perspective is aimed at delivering quality medical services also in Bahrain and Jordan, as well as creating an outsourced health insurance department in life insurance companies.



Geographical scope

Egypt



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ANDRES RUBIANO

FUNDACIÓN MEDITECH

Traumatic injuries are the number one cause of death in Colombia. Dr. Andrés Rubiano is fostering a new consciousness and an innovative system against traumatic injury by converting the roles of hospitals, emergency medical agencies and public sector institutions through the coordination and proactive response to this dramatic problem.

Meditech generates education models and high-quality research processes while providing virtual universal access opportunities to basic and advanced-level health personnel on the management of critical health situations. They have trained more than 5,000 health professionals across Colombia and Latin America on effective and more efficient methodologies of trauma care and accident prevention, reaching extremely remote areas within these countries.

They have conducted a wide range of in-depth trauma research that is influencing policy at the national and international levels. Their methodology on emergency care is also being promoted by the World Bank and the Gates Foundation through the Disease Control Priorities program and publication. Meditech is sought after by many hospitals looking to improve their systems and who are joining Andres' growing network of trained medical centers. Last but not least, they develop eHealth/mHealth strategies to generate data for impact policy-making decisions.



Geographical scope

Colombia	Paraguay
Ecuador	Bolivia
Peru	Chile



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ARMIDA FERNANDEZ

SNEHA



Armida is empowering women and slum communities to be catalysts of change in their own right and collaborate with existing public health systems and providers to create sustainable improvements in urban health. The infant mortality rate in India continues to be stagnant and a staggering 60% of infant deaths occur during the first 4 weeks of life. After years of experience as a practicing paediatrician and a senior administrator in the urban public health system, Dr. Fernandez found that the real problem at the system level was a lack of efficient utilization of resources and started SNEHA.

SNEHA's strategy has three components: first, it ensures that every level and unit of public health care provides quality services and is used appropriately and optimally; second, it transforms clients into partners by equipping them to make decisions that use the system more efficiently; and third, it uses a behaviour change methodology to influence attitudes of health care personnel towards their clients.



Geographical scope

India



Useful links

[Website SNEHA](#)

[Ashoka Profile](#)

ASHER HASAN

NAYA JEEVAN & DOCTHERS



Naya Jeevan's unique value proposition lies at the intersection between health-care financing and institutionalized philanthropy. He provides low income populations with insurance premiums which are cross-subsidized through institutional mechanisms and financed by higher income populations. Since sponsors have a defined relationship with the beneficiary (e.g. employers, contractors, supply chain partners), they have a sustainable reason and ability to pay some or all the premium for the low-income beneficiary. In return, the beneficiaries are provided with cashless card-based services at over 190 high-quality, private hospitals across Pakistan.

Asher is currently focused on scaling the impact of a newer aspect to their model; DoctHers. DoctHers is an online healthcare platform which connects female DoctHERs to health consumers in real-time. The model transcends socio-cultural barriers that restrict women healthcare professionals to their homes, while counteracting two market failures: (1) the access to quality healthcare for underserved communities and (2) the inclusive employment for women.

Naya Jeevan has provided 300,000 urban slum dwellers with access to primary health care and conducted more than 7500 remote medical health consultations. The project enrolled more than 65,000 people in integrated health insurance plans and saved over 500 people with lifesaving interventions. DoctHERS has impacted over 45,000 lives through its network of 10 telemedicine centers across Pakistan (6 in Karachi, 3 in KPK and 1 in Punjab), while engaging over 300 in-network healthcare delivery partners and more than 19,000 people enrolled in health and wellness plans.



Geographical scope

Pakistan



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CARLOS ATENCIO

FUNDACION MEDICINA FAMILIAR



Carlos Atencio is responding to the failing healthcare system in Venezuela by introducing a new model of care based on ‘family medicine’ and centered on community participation and responsibility. His Family Medicine Foundation designs community centres around the notion that the same health team supports an individual or family. These centres provide patients with affordable primary care (that resolves 85% of health issues in low income communities), trains medical professionals in family medicine techniques, and makes patients aware of their role in their own healthcare.

The project operates in 4 centers of some of the the most impoverished areas in Venezuela. It currently provides people with more than 50,000 health services per year and have operated uninterrupted, providing quality care for over 2 decades. The staff is trained to solve 85% of the health problems presented by any of their users.

Carlos successfully developed the procedures, the attention protocols and indicators that allow the reproducibility of the model in other places. As a result, Carlos is also reducing medical costs, reviving a dying “specialty”, and putting communities in charge of their wellness.



Geographical scope

Venezuela



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DY SUHARYA

ALZHEIMER INDONESIA



The 2015 World Alzheimer Report estimated that about 22.9 million people in the Asia Pacific region live with dementia, whose cost seems to be US\$180.1 billion.

For long, dementia has been considered a normal process of aging. Not many people recognized its causal relation with Alzheimer, a degenerative disease affecting the brain tissue. DY is creating a support system for people with dementia, as well as building public awareness of possible warning signs and transmitting recommendations after detection. She's pioneering a cross-generational movement aimed at improving the life quality of the people affected by Alzheimer and their caregivers as well as reducing the risk of dementia among the general population.

The project successfully established 21 different support groups in 21 provinces and invited people to be part of the movement through contributing time, skills and training as caregivers. Alzheimer Indonesia's model has been acknowledged as the best practice for awareness building campaigns by countries like Japan, Thailand, Malaysia and Singapore and its content is widely used in the region (having been translated in 10 languages and being used in 5 different countries). Moreover, DY lobbied the Health Ministry to launch Indonesia's first Dementia National Plan in March 2016.



Geographical scope

Indonesia
South East Asia



Useful links

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EDITH GRYNSPANHOLC

FNDF – HELPING CHILDREN WITH CANCER

Edith is strengthening pediatric care in Argentina, particularly outside Buenos Aires.

FNDF is transforming the way individual health records are collected and digitized from rural and hard-to-reach areas and, the way data use culture is established for continuous quality of care improvement.

Through their platform and software, they provide a greater information flow and advocacy. The results of their work are many—from new pediatric care centers built in the provinces (not the main cities), to the introduction of oncology departments in existing hospitals. They also lead to greater parents' participation in shaping healthcare services so that families can access high-quality treatment in rural areas without compromising the quality of care.

For the last 10 years, they have helped tens of thousands of patients by identifying barriers and coming up with solutions to access critical quality care. The Foundation has developed 7 Chapters, in cities of different sizes and provinces throughout Argentina, delivering at least one FNDF's service to more than 1,000 families each month.



Geographical scope

Argentina
Latin America



Useful links

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HILMI QURAIISHI

MIRA CHANNEL



After working for many years in the healthcare sector, Hilmi conceived MIRA Channel in 2013 to counteract the high maternal and infant mortality rates. MIRA is a holistic mobilephone channel that delivers women with maternal & child health information and provisions services by timely connecting with public health system. MIRA comprises multiple sub-channels such as Pre-natal Care, Child immunization, New-born care, Family planning and Adolescent Girl health through the use of RMNCH+A approach aimed at improving MCH indicators. MIRA delivers information through transmitting localized audio that works as 'Talking toolkit' for millions of semiliterate women. Women are also tracked for high-risk pregnancy symptoms which are sent over cloud to Midwives enabling to take immediate action. It has a 'Live dashboard' which tracks minute-by-minute progress of pregnancies and high-risk symptom for timely decision.

MIRA has been implemented in India, Uganda and Afghanistan and has benefitted over 950,000 women & children. Due to MIRA's work, an increase in ANC visits by 55%, institutional deliveries by 49% & immunization rates by 41% has been achieved. Moreover, MIRA PHC connect model has impacted 69,000 women.

Prompt action has been taken by Midwives in 84% of the High Risk Pregnancy (HRPs) queries raised by CHWs. There are 51 infant girls named MIRA in Uganda!



Geographical scope

India
East Africa
Afghanistan
Senegal



Useful links

[Website 1](#)

[Website 2](#)

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[Article](#)

JAVIER LOZANO

CLÍNICAS DEL AZUCAR (SUGAR CLINICS)



Diabetes has reached epidemic proportions in Mexico, with 70,000 deaths attributable to the disease each year.

Clínicas del Azúcar (Sugar Clinics) seeks to turn these alarming statistics around, offering specialized, affordable diabetes care to low- and middle-income patients who otherwise would go under- or un-treated. They offer efficient and affordable care through its one-stop shop model, proprietary software platform, Balance, and subscription pricing mechanism. The software platform optimizes costs and customizes treatment whilst package prices are determined through a proprietary algorithm that calculates the best-suited type of care according to the different profiles.

The Clinics treated more than 60,000 patients, being around 72% of patients from low- and middle-income communities. The project was able to prevent around 12,000 complications, reducing diabetes complications rates by 60%. The adherence to the treatment increased by 1300% and saved around US 27,545,059 for patients and public services (average annual savings for patients 75%).



Geographical scope

Mexico



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PRASANTA TRIPATHY

EKJUT



Ekjut's efforts target health issues faced by tribal communities and other vulnerable low-income people who live in Jharkhand and Orissa – two of the most impoverished Indian States.

Ekjut is piloted, applied, refined and scaled up with a unique community capacity building process called participatory learning and action (PLA). PLA's purpose is empowering women while encouraging them to reason out the causes of their long-standing problems including deaths of newborn babies, maternal deaths, malaria and malnutrition among children.

After 3 years of intervention and during the last two years of Ekjut's clinical trial, neonatal mortality and maternal depression has been estimated to drop by 45% and 57% respectively. Ekjut has directly worked with 2,000 villages. While working with governments, the project has impacted 30,000 villages and it reached around 20,000 villages through their work with international agencies.

The project is currently scaling up PLA through work with Government to reduce neonatal mortality in the state of Jharkhan in India.



Geographical scope

India



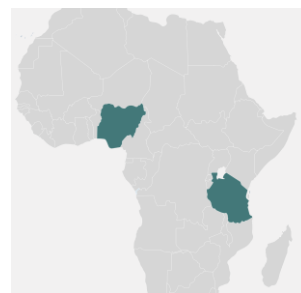
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RITA MELIFONWU

STROKE ACTION NIGERIA



Rita is redefining stroke treatment and management in Nigeria, providing medical personnel, citizens and government with the right resources to help patients through their treatment process while overcoming political, economic, clinical and technological barriers and preventing stroke. She believes that her experience and learnings can be adapted to other NCDs such as hypertension and cancer. She has already set up two Life After Stroke Centers and seven Stroke Support Groups offering stroke advice, low-cost medicines, advocacy, rehabilitation, and sales of products (stroke related books, rehabilitation equipment).

Last year, Stroke Action was able to reach 1500 people through its facilities in Abuja and. Moreover, Stroke Action engaged 28 Volunteer Ambassadors (stroke survivors, carers, healthcare professionals) across 9 states aimed at providing people with basic stroke advice, information and support their areas without any funding support.

In terms of policy change, Stroke Action Nigeria has an MOU with the Federal Ministry of Health with the key objectives to establish more Centers and Groups, develop a national stroke register and programs of stroke education and implement training for healthcare professionals. Thanks to their work, World Stroke Day is now celebrated in Nigeria every year.



Geographical scope

Nigeria
Tanzania
[Uganda | Cameroon | Ghana
potential replication]



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SANJEEV ARORA

ECHO



Project ECHO was founded in 2003 at the University of New Mexico to address the lack of access to specialty healthcare among the underserved New Mexican rural populations. The ECHO model is an innovative learning platform that uses simple videoconferencing technology and clinical management tools to connect interdisciplinary specialist teams at academic medical centers (hubs) with frontline healthcare workers in rural and underserved areas (spokes). The strategy aims at delivering mentoring, case-based learning and dissemination of expertise among practitioners. The ECHO model is not “telemedicine” where the specialist assumes the care of the patient; it is a guided practice model where the primary care clinician retains responsibility for managing patients while operating with increasing independence as their skills and self-efficacy grow.

Over 163 replicating partners in the US and across 24 other countries are utilizing ECHO for over 55 different diseases and conditions, including hepatitis C, tuberculosis, HIV, cancer, diabetes, substance use disorders, and global health security. Moreover, the program was able to present more than 70 peer-reviewed publications demonstrating the effectiveness of the model showing positive results for patients’ outcomes and for providers’ sense of self-efficacy, knowledge, and professional satisfaction.

In December 2016, the US Congress unanimously passed the ECHO Act, mandating that the Department of Health and Human Services study the potential of the ECHO model for widespread adoption across US healthcare systems.



Geographical scope

- US and Europe
- 7 South East Asia Countries
- 6 Africa Countries
- 6 South America Countries

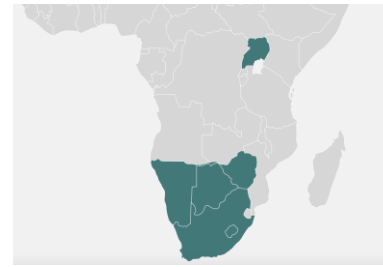


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SHONA MCDONALD

SHONAQUIP & UHAMBO



Shonaquip provides African disabled children with well-built wheelchairs and body support devices that are suitable for the Southern African terrain with the aim of reducing the development of secondary health complications.

The devices are also distributed free of charge to communities in need through Uhambo Foundation, who also educates caregivers, community members, parents and disabled with postural education techniques and mobility device usage and maintenance. Shonaquip and Uhambo also drive policy change and advocate to Governments and other public institutions to foster the public provision of appropriate body support devices and allow disabled children to live an healthy and productive life.

The team also works with government service to influence the implementation of their best practices (e.g. already happened in Botswana) and build the capacity of the service providers to influence governments, where advanced healthcare service does not exist (e.g. Zimbabwe).

The World Health Organization (WHO) is also working with Shona to change their policies related to wheelchair and mobility equipment provision to populations in need all over the world.

Through direct provision of services and support, they are impacting an average of 20,000 a year users among caregivers, families and service providers. They recently established a training academy and are currently building a mentoring platform to support rehab professionals and families with remote clinical and technical support.



Geographical scope

South Africa	Namibia
Zimbabwe	Lesotho
Botswana	Uganda



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