Merck Capacity Advancement Program

Merck KGaA

Submitted as part of Access Accelerated
Contents

Program Description 3
Program Overview 4
Program Strategies & Activities 5
Companies, Partners & Stakeholders 6
Local Context, Equity & Sustainability 8
Additional Program Information 9

Resources 10

Program Indicators 11

Appendix 12

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The information contained in this report is in the public domain and should be cited as: Merck KGaA, Merck Capacity Advancement Program (2018), Access Observatory Boston, US 2018 (online) available from www.accessobservatory.org
Program Description
Program Overview

1. Program Name
Merck Capacity Advancement Program

2. Diseases program aims to address
• Diabetes (general)
• Cancer (general)
• General NCD Care (health system)

3. Beneficiary population
• General population

4. Countries
• Angola
• Bangladesh
• Cambodia
• Camaroon
• Central African Republic
• Congo
• Cte d’Ivoire
• Equatorial Guinea
• Ethiopia
• Ghana
• India
• Indonesia
• Kenya
• Liberia
• Malawi
• Mali
• Mozambique
• Myanmar
• Nepal
• Nigeria
• Rwanda
• Senegal
• Sierra Leone
• South Africa
• Sri Lanka
• Tanzania
• Uganda
• United Arab Emirates
• Zambia
• Zimbabwe

5. Program start date
January 1, 2012

6. Anticipated program completion date
Completion date not specified

7. Contact person
Yasmine Rouai (Yasmine.rouai@emdserono.com)

8. Program summary
Merck’s Capacity Advancement Program (CAP) is a collaboration with Ministries of Health, universities, and local associations across Sub-Saharan Africa and Asia. The aim of the program is to expand professional capacity in the areas of research and development, medical education, and community awareness of diabetes, cancer and other non-communicable diseases (NCD). By educating and training medical students and healthcare providers from the start, the program strengthens local capacities and enhances clinical management processes. The ultimate goal is to raise awareness for these health conditions as well as to support healthcare systems with the measures to prevent, diagnose, and manage cancer, diabetes, and other NCDs effectively.

Merck has engaged with a wide range of relevant local stakeholders in order to inform the approach to program initiatives, which includes identifying learning and capacity gaps, tailoring the learning materials to suit the local environment, implementing and following programs, and managing performance and sustainability. The program has helped to develop structured, country-specific and partnership-based program initiatives that are aligned with countries’ national strategies.

Activities under CAP include the following:
• Training of healthcare providers, medical students, new graduates and community health workers
• Community awareness campaigns
• Patient screening through medical camps
• Development of a diabetes awareness SMS campaign\(^1\)\(^2\)
Program Strategies & Activities

Strategies and activities

Strategy 1: Health Service Strengthening

<table>
<thead>
<tr>
<th>ACTIVITY</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Training</td>
<td>Provide in-country training.</td>
</tr>
</tbody>
</table>

Strategy 2: Health Service Delivery

<table>
<thead>
<tr>
<th>ACTIVITY</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Screening</td>
<td>Community screening for diabetes in medical camps.</td>
</tr>
</tbody>
</table>

Strategy by country

<table>
<thead>
<tr>
<th>STRATEGY</th>
<th>COUNTRY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Service Strengthening</td>
<td>[No response provided].</td>
</tr>
<tr>
<td>Health Service Delivery</td>
<td>[No response provided].</td>
</tr>
</tbody>
</table>
Companies, Partners & Stakeholders

11 Company roles

<table>
<thead>
<tr>
<th>COMPANY</th>
<th>ROLE</th>
</tr>
</thead>
<tbody>
<tr>
<td>EMD Serono</td>
<td>Funding and providing materials for the training for healthcare provider and medical students education and awareness; support for health systems by building local capacity and strengthening clinical management processes.</td>
</tr>
</tbody>
</table>

12 Funding and implementing partners

<table>
<thead>
<tr>
<th>PARTNER</th>
<th>ROLE/URL</th>
<th>SECTOR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Local Universities</td>
<td>Design and implementation of medical curriculum and training, according to local need areas.</td>
<td>Public</td>
</tr>
<tr>
<td>Medical/pharmaceutical associations</td>
<td>Support implementation of the diverse activities depending on the specific context and local partnerships.</td>
<td>Voluntary</td>
</tr>
<tr>
<td>Ministries of Health</td>
<td>Ministries of health to assist in developing and implementing comprehensive cancer prevention and control programs and to educate medical students and healthcare providers about cancer early detection and prevention.</td>
<td>Public</td>
</tr>
</tbody>
</table>
### Funding and implementing partners by country

<table>
<thead>
<tr>
<th>PARTNER</th>
<th>COUNTRY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Local Universities</td>
<td>[No response provided].</td>
</tr>
<tr>
<td>Medical/pharmaceutical associations</td>
<td>[No response provided].</td>
</tr>
<tr>
<td>Ministries of Health</td>
<td>[No response provided].</td>
</tr>
</tbody>
</table>

### Stakeholders

<table>
<thead>
<tr>
<th>STAKEHOLDER</th>
<th>DESCRIPTION OF ENGAGEMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Government</td>
<td>Engage with Ministries of Health in developing and implementing comprehensive cancer prevention and control programs and to educate medical students and healthcare providers about cancer early detection and prevention.</td>
</tr>
<tr>
<td>Local Universities</td>
<td>Engage with local universities in the design and implementation of medical curriculum and training, according to local need areas.</td>
</tr>
</tbody>
</table>
Local Context, Equity & Sustainability

15 Local health needs addressed by program
There has been a rapid rise in disability and premature death due to non-communicable diseases (NCDs) in low and middle income countries in recent years.2 Africa has been hit the hardest, with NCD related death rates rising faster than the rest of the world.3 Health systems in low income countries are often not equipped to respond to these illnesses.4 To combat this growing epidemic, Merck aims to increase capacity in these health systems by providing training to medical students and health care providers in under-resourced areas.

16 Social inequity addressed
Merck’s Capacity Advancement Program (CAP) aims to expand professional capacity in the areas of research and development, medical education, and community awareness of diabetes, cancer and other non-communicable diseases (NCD) in Sub-Saharan Africa and Asia. This program will help reduce the global inequity in diabetes, cancer and NCDs awareness, diagnosis and management between Africa, Asia, and high income countries.

17 Local policies, practices, and laws considered during program design
Merck’s Capacity Advancement Program (CAP) addresses deficiencies in education among healthcare professionals (HCPs) related to cancer and other non-communicable disease (NCD) care management. By training medical students and healthcare providers in best practices, the program contributes to building local capacity. CAP works directly with universities in several regions around the world to design trainings in chronic diseases management that suit the local environment and medical needs of developing nations. By establishing close collaboration with Ministries of Health in the respective countries, contextually competent initiatives are designed, which respond to national strategic plans and are built upon pre-existing progress.

18 How program meets or exceeds local standards
[No response provided].

19 Program provides health technologies (medical devices, medicines, and vaccines)
No.

20 Health technologies are part of local standard treatment guidelines
Not applicable.

21 Health technologies are covered by local health insurance schemes
Not applicable.

22 Program provides medicines listed on the National Essential Medicines List
No.

23 Sustainability plan
[No response provided].
Additional Program Information

24 Additional program information
[No response provided].

25 Access Accelerated Initiative participant
Yes.

26 International Federation of Pharmaceutical Manufacturers & Associations (IFPMA) membership
Yes.
Resources


2. IFPMA. Capacity Advancement Program (CAP). http://partnerships.ifpma.org/partnership/capacity-advancement-program-cap


Program Indicators

Not yet available for this program
Appendix

Program Description

PROGRAM OVERVIEW

1. Program Name

2. Diseases program aims to address:
   Please identify the disease(s) that your program aims to address (select all that apply).

3. Beneficiary population
   Please identify the beneficiary population of this program (select all that apply).

4. Countries
   Please select all countries that this program is being implemented in (select all that apply).

5. Program Start Date

6. Anticipated Program Completion Date

7. Contact person
   On the public profile for this program, if you would like to display a contact person for this program, please list the name and email address here (i.e. someone from the public could email with questions about this program profile and data).

8. Program summary
   Please provide a brief summary of your program including program objectives (e.g., the intended purposes and expected results of the program; if a pilot program, please note this). Please provide a URL, if available. Please limit replies to 750 words.

PROGRAM STRATEGIES & ACTIVITIES

9. Strategies and activities
   Based on the BUSPH Taxonomy of Strategies, which strategy or strategies apply to your program (please select all that apply)?

10. Strategy by country
    If you have registered one program for multiple countries, this question allows you to provide a bit more specificity about each country (e.g. some countries have different strategies, diseases, partners, etc.). Please complete these tables as applicable. For each portion you have you selected from above (program strategies), please identify which country/countries these apply.

COMPANIES, PARTNERS AND STAKEHOLDERS

11. Company roles
    Please identify all pharmaceutical companies, including yours, who are collaborating on this program:
    What role does each company play in the implementation of your program?

12. Funding and implementing partners
    Please identify all funding and implementing partners who are supporting the implementation of this program (Implementing partners is defined as either an associate government or non-government entity or agency that supplements the works of a larger organization or agency by helping to carry out institutional arrangements in line with the larger organization's goals and objectives.)
    a. What role does each partner play in the implementation of your program? Please give background on the organization and describe the nature of the relationship between the organization and your company. Describe the local team's responsibilities for the program, with reference to the program strategies and activities. (response required for each partner selected).
b. For each partner, please categorize them as either a Public Sector, Private Sector, or Voluntary Sector partner. (Public Sector is defined as government; Private Sector is defined as a business unit established, owned, and operated by private individuals for profit, instead of by or for any government or its agencies. Generation and return of profit to its owners or shareholders is emphasized; Voluntary Sector is defined as Organizations whose purpose is to benefit and enrich society, often without profit as a motive and with little or no government intervention. Unlike the private sector where the generation and return of profit to its owners is emphasized, money raised or earned by an organization in the voluntary sector is usually invested back into the community or the organization itself (ex. Charities, foundations, advocacy groups etc.))

c. Please provide the URL to the partner organizations' webpages

13 Funding and implementing partners by country
If you have registered one program for multiple countries, this question allows you to provide a bit more specificity about each country (e.g., some countries have different strategies, diseases, partners, etc.). Please complete these tables as applicable. For each portion you have you selected from above (funding and implementing partners), please identify which country/countries these apply.

14 Stakeholders
Please describe how you have engaged with any of these local stakeholders in the planning and/or implementation of this program. (Stakeholders defined as individuals or entities who are involved in or affected by the execution or outcome of a project and may have influence and authority to dictate whether a project is a success or not (ex. Ministry of Health, NGO, Faith-based organization, etc.). Select all that apply.

Government, please explain
Non-Government Organization (NGO), please explain
Faith-based organization, please explain
Commercial sector, please explain
Local hospitals/health facilities, please explain
Local universities, please explain
Other, please explain

LOCAL CONTEXT, EQUITY & SUSTAINABILITY

15 Local health needs addressed by program
Please describe how your program is responsive to local health needs and challenges (e.g., how you decided and worked together with local partners to determine that this program was appropriate for this context)?

16 Social inequity addressed
Does your program aim to address social inequity in any way (if yes, please explain). (Inequity is defined as lack of fairness or justice. Sometime ‘social disparities,’ ‘structural barriers’ and ‘oppression and discrimination’ are used to describe the same phenomenon. In social sciences and public health social inequities refer to the systematic lack of fairness or justice related to gender, ethnicity, geographical location and religion. These unequal social relations and structures of power operate to produce experiences of inequitable health outcomes, treatment and access to care. Health and social programs are often designed with the aim to address the lack of fairness and adjust for these systematic failures of systems or policies.*)

*Reference: The definition was adapted from Ingram R et al. Social Inequities and Mental Health: A Scoping Review. Vancouver: Study for Gender Inequities and Mental Health, 2013.

17 Local policies, practices, and laws considered during program design
How have local policies, practices, and laws (e.g., infrastructure development regulations, education requirements, etc.) been taken into consideration when designing the program?

18 How program meets or exceeds local standards
Is there anything else that you would like to report on how your program meets or exceeds local standards?

19 Program provides health technologies
Does your program include health technologies (health technologies include medical devices, medicines, and vaccines developed to solve a health problem and improve quality of lives)? (Yes/No)
Health technology(ies) are part of local standard treatment guidelines
Are the health technology(ies) which are part of your program part of local standard treatment guidelines? (Yes/No) If not, what was the local need for these technologies?

Health technologies are covered by local health insurance schemes
Does your program include health technologies that are covered by local health insurance schemes? (Yes/No) If not, what are the local needs for these technologies?

Program provides medicines listed on the National Essential Medicines List
Does your program include medicines that are listed on the National Essential Medicines List? (Yes/No) If not, what was the local need for these technologies?

Sustainability plan
If applicable, please describe how you have planned for sustainability of the implementation of your program (ex. Creating a transition plan from your company to the local government during the development of the program).

Program Indicators

List of indicator data to be reported into Access Observatory database
For this program, activities, please select all inputs and impacts for which you plan to collect and report data into this database.

Data source
For this indicator, please select the data source(s) you will rely on.

Frequency of reporting
Indicate the frequency with which data for this indicator can be submitted to the Observatory.

Data collection
a. Responsible party: For this indicator, please indicate the party/parties responsible for data collection.
b. Data collection — Description: Please briefly describe the data source and collection procedure in detail.
c. Data collection — Frequency: For this indicator, please indicate the frequency of data collection.

Data processing
a. Responsible party: Please indicate all parties that conduct any processing of this data.
b. Data processing — Description: Please briefly describe all processing procedures the data go through. Be explicit in describing the procedures, who enacts them, and the frequency of processing.
c. Data processing — Frequency: What is the frequency with which this data is processed?

Data validation
Description: Describe the process (if any) your company uses to validate the quality of the data sent from the local team.

Challenges in data collection and steps to address challenges
Please indicate any challenges that you have in collecting data for this indicator and what you are doing to address those challenges.