

IMPACT & INNOVATION SERIES

THE BUSINESS CASE: Why and How Should Industry Engage

in Maternal and Newborn Health?



THE NATIONAL BUREAU of ASIAN RESEARCH

Center for Health and Aging

Published in the United States of America by The National Bureau of Asian Research (NBR) 1414 NE 42nd Street, Suite 300 Seattle, Washington 98105 United States of America +1-206-632-7370 Phone +1-206-632-7487 Fax nbr@nbr.org E-mail http://www.nbr.org

© 2011 by The National Bureau of Asian Research

2011 updated edition compiled and edited by Rebecca Kennedy, Karuna Luthra, and Claire Topal.

2010 edition compiled by the NBR Center for Health and Aging (Pacific Health Summit Secretariat), with critical input from Joy Lawn, Steven Phillips, Kate Taylor, Mark Feinberg, Stefan Germann, and O. Massee Bateman.

This publication may be reproduced for personal use. Otherwise, its articles may not be reproduced in full without the written permission of NBR. When information from this report is cited or quoted, please cite The National Bureau of Asian Research.

The views expressed in this publication do not necessarily reflect the views of the institutions that support NBR.

NBR is a nonprofit, nonpartisan research institution that focuses on major policy issues in the Asia-Pacific and their impact on the United States. Major themes in NBR's research agenda include strategic and diplomatic relations, regional economic integration and development, trade, globalization, terrorism, energy, and health. Drawing upon an extensive network of the world's leading specialists and leveraging the latest technology, NBR conducts advanced, policy-oriented analysis on these issues and disseminates the results through briefings, studies, conferences, television, and e-mail fora.

NBR is a tax-exempt, nonprofit corporation under I.R.C. Sec. 501(c) (3), qualified to receive tax-exempt contributions.

Printed in the United States of America.

Summit participant photos by Ben Gilbert and Dave Sayers, Wellcome Trust, United Kingdom. Photos property of the Pacific Health Summit unless otherwise noted.

Cover photo by Jacqueline M. Koch for Merlin.

TABLE OF CONTENTS

THE BUSINESS CASE:

Why and How Should Industry Engage in Maternal and Newborn Health?

----- 2011 Edition ------

Part 1: The Business Case for Investing in Maternal and Newborn Health Engaging beyond CSR

Part II: Voices of Industry

Industry leaders and their MNH partners share their perspectives on how to effectively forge partnerships with the private sector

18 Part III: Where does an interested company start? Resources to catalyze action

A healthy baby girl is born in the Pyin Sa Lu Subtrowshift Hospital Located region of Myanmar the Idbed hospital hos or de fotoon stift and is one of two hospitals for a population of 350,000 pe open.



PART ITHE BUSINESS CASE FOR INVESTING
IN MATERNAL AND NEWBORN HEALTH (MNH)

When a health issue becomes the focus of global attention from civil society, international leaders, and the business community, progress is accelerated, more lives are saved, and programmatic impact grows exponentially. Astounding recent strides in reducing maternal and child deaths shows that success is happening, more progress is within our reach, and now is the perfect time to be bolder and more ambitious.

The universal experience surrounding birth should be one of celebration, not loss. Simply put, "success" means wanted pregnancies, safe births, and the survival of mothers and newborns. What does it take? Essentially this: basic equipment and medicines, a safe environment, and the right person to help the mother and baby during birth and in the critical days that follow. For the business sector, the unprecedented attention directed toward MNH in recent years highlights exciting, growing markets for appropriate and much-needed products, processes, and services.

Few markets are as highly motivated and attuned to innovative commodities, technologies, and messaging as expectant mothers and fathers. All cultures worldwide celebrate when both mother and baby survive and are healthy. Yet each year, 60 million births take place at home, and very few of these involve a skilled attendant. The business sector, with its power to innovate, has a unique capacity to help close the service gap for mothers and babies and meet demand for skilled caregivers, as well as provide appropriate tools and technologies, even in the remotest areas.

The corporate sector's ability to create sustainable models for constructing, deploying, and delivering products and services places it in a unique position to make an impact. Business expertise and commercial infrastructure, if effectively harnessed and directed, could be the key to addressing MNH challenges.

By investing in activities, products, and processes that impact MNH, companies develop a new market for their own commodities and services, build societal support for their operations, enhance government and community relationships, create a positive community footprint, and improve their reputation—both locally and on a global scale. Most companies have a vested interest in addressing the health and well-being of the communities in which they work and recognize that doing so is a critical component of any strategy for sustained success. These investments can enhance visibility and relationships with national governments while boosting reputations with consumers. But engagement does not only have to come from corporate social responsibility (CSR). As companies have explored how the products and services of their core business models can engage and profoundly impact communities, many have discovered unforeseen entry points into new markets and built added value for their employees and customers.

As business leaders, you hold tremendous power to advance change and influence policy.

Executives can promote healthy behaviors and appropriate use of health services. You can also facilitate employee-based social responsibility campaigns. Such leadership inspires public health leaders to be open to, and seek out, partnerships with business.



Opportunities to make an impact are limitless. As MNH is intertwined with almost every other global health and development issue, becoming more engaged in MNH does not have to occur at the exclusion of other types of support:

- Addressing other diseases (for example, HIV/AIDS, TB, or malaria) often has a direct impact on the most vulnerable demographic: pregnant women and newborns.
- Information and communications technology infrastructure is good for business and trade and enhances the reach of primary health systems.
- Roads and other infrastructure improve business while also helping to connect women and newborns with skilled caregivers and safe, equipped institutions.
- Education increases awareness and promotes healthy behaviors. Educated women are more likely to seek out care for themselves and their children.
- Agricultural development and housing sustains and creates a more stable environment for families and communities.
- Microfinance empowers women and helps them support their families.

The contribution, investment, and talent that the business community can bring to the table to mobilize around MNH are limitless.

So how do we stimulate, marshal, and energize the creativity of the business sector to address some of the huge challenges that the MNH field faces?

2



PART II: VOICES OF INDUSTRY

A major focus of the 2010 Pacific Health Summit, which addressed the theme of "Maternal and Newborn Health: The Crux of a Decent Humanity," was the vital role of industry in any sustainable solution to global health challenges. Summit participants remarked that the 2010 Summit represented a "historic conversation" and opened unprecedented dialogue between the private sector and the policy, non-profit, and donor communities. Leaders in the room also agreed that the unique discussion, which engaged leaders from across sectors, including science, industry, and policy, helped transform their priorities and perspectives, and provided practical advice and direction on different avenues for private sector involvement in the MNH field.

The Question and Answer format following this page represents excerpts from a Summit plenary session entitled, "Delivering Results: How Can We Mobilize the Creativity of Business?"

David Boyd Director, European Government and Public Affairs, GE Healthcare

Brian Brink Chief Medical Officer, Anglo American PLC

Kevin Jenkins President & CEO, World Vision International

> **Leslie Mancuso** President & CEO, Jhpiego

Contributors

Sheri McCoy Vice Chairman, Executive Committee, Johnson & Johnson

Ali Mufuruki Chairman & CEO, Infotech Investment Group

Babatunde Osotimehin Executive Director, United Nations Population Fund

.....

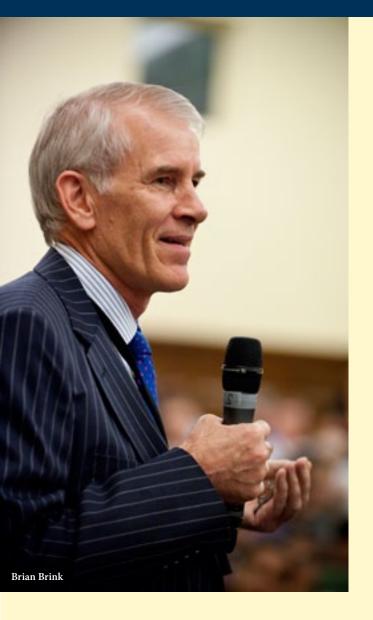
Martin Riant President, Global Baby Care, Procter & Gamble

Jerry Wilson Chief Customer and Commercial Officer & Senior Vice President, The Coca-Cola Company

> Andrew Witty CEO, GlaxoSmithKline

> > 3

How do we mobilize industry to become more involved in MNH and why and how can businesses leverage their core capabilities for the cause? What are some examples of successful cross-sector partnerships with the business sector that address MNH?



.....

A. Martin Riant | Synchronize the corporate mission with business opportunity in emerging economies

You mobilize business, especially on a sustainable basis, by making sure that there is synchronization of corporate objectives with your cause. We've defined our purpose at Procter & Gamble as a company to touch and improve lives, in more parts of the world, and more completely. And that's what we've challenged the organization to do while using our strengths in consumer understanding and innovation. We're not doing it just because we're nice people, but because it's good business. It leads us to find business opportunities, it inspires employees, and we are regarded as good corporate citizens. A good example of this is the P&G Children's Safe Drinking Water program in which we provide clean drinking water using PUR packets to prevent waterborne illness. With this program, we have been able to help provide more than three billion liters of clean drinking water in the developing world

Brian Brink | Locate intersections of corporate missions with health system needs

Much of our experience derives from programs that we [at Anglo American PLC] initiated for our employees to respond to HIV and AIDS. Those programs were so successful in the workplace that we knew that we had to extend them to the families. When you go beyond and see where some of the families are living, where the available health services are simply not adequate to provide for the needs of the population, you start thinking differently about what kind of intervention your company could make that would make a difference.

The longer I've been involved, the more I realize that we must get involved in trying to strengthen the health system using our business expertise. Vertical programs certainly taught us a lot, but each vertical program on its own is not going to create a solution. The optimal solution has to come out of stronger health systems and understanding what that means and what the building blocks of health systems strengthening are. There are at least six building blocks that I know of, and businesses could address each one of those: information systems, financing, medical equipment, the healthcare workforce, governance, and the procurement and supply chain. Pick one as a business which harmonizes with your mission, and that's the place to get engaged.

There's a lot of intelligence within a given country and we should leverage that intelligence when we're developing a business model.

-Leslie Mancuso

Leslie Mancuso | Gather intelligence from experts within target regions

For any of us to build a business model around what there is to be done in particular countries, we must be working with those countries' experts. They know their system; they know the gaps in their system. The health workers on the ground know what the day-to-day situation is like and what equipment or skills are lacking. There's a lot of intelligence within a given country and we should leverage that intelligence when we're developing a business model.

Ali Mufuruki | Approach healthcare as a business opportunity

The issue of mother and newborn health in my country of Tanzania is a very big problem. The city of Dar es Salaam, which has four million residents, sees 95,000 births every year. Of these, 92% occur in three hospitals, all very close by to one another in the city. There are 188 deliveries per day but only 46 delivery beds. The Caesarean section rate is less than 5%. Last year, we had 107 maternal deaths and 108,065 stillborns.

Dar es Salaam is a very privileged place to live in Tanzania–we have electricity most of the time and our hospitals are within maybe 30-60 minutes reach from most people who live in the city. Yet you have those catastrophic figures. Now project these statistics on the rest of the population, the 80% or so who live in rural areas where there are no such health services and there are various infrastructural constraints. Then you see a very clear catastrophe. I choose, however, not to see this as such.

For a change, we should look at this disparity as an incredible business opportunity—is this possible? Someone said that one reason why the healthcare system works in the north is because the markets are very ruthless and I agree with him. The question is: Why is it that in countries where the markets are ruthless, healthcare systems seem to be working, while in countries where healthcare is approached more or less like a missionary kind of duty, healthcare systems are failing? You can give all the aid you want and governments can put all the money they want into healthcare, but if there is no profit motive, if people don't become involved in this healthcare business in pursuit of some kind of profit, I don't see it working.



Q. How can businesses contribute to implementing or promoting improvements in MNH outcomes in developing countries in a sustainable yet still business-minded way?

We must challenge the organization not to do the easy thing, which is simply writing a check, but to do the difficult thing, which is to understand how we can deploy our people and skills in terms of system development...

-Andrew Witty

A. Leslie Mancuso | Look beyond CSR models Today we must look beyond CSR; it's about looking for the future business models that are going to help us address maternal and newborn health. When I say future, I mean today. Every minute, there's a woman's dying, so I'm looking at today to start working on the whole issue of health systems strengthening. We're fixing a piece of the system, but not doing it all to make it sustainable. Where can the businesses fit into that? What do you from industry recommend for the future so that we don't get this discrete little program that really isn't in fact helping that country in the long run? At Jhpiego, we strive to strengthen not only one hospital or region's facilities but work to impact national policy and strengthen a country's entire health system.

Andrew Witty | Raise the standard of engagement

We must challenge the organization not to do the easy thing, which is simply writing a check, but to do the difficult thing, which is to understand how we can deploy our people and skills in terms of system development to address different challenges and different geographies. I think one of the key challenges that we're dealing with is: How do we really make sure that we can have that optimum level of contribution going on in 60 countries in parallel? That's quite an issue in terms of sustainability. How do you keep it going on that broad front all the time while raising the standard?



Ali Mufuruki | Address core, on-the-ground problems unique to the locale

I respect the idea of making a motorcycle ambulance—it's taking care of a problem today. But who is going to put the fuel in that bicycle or motorcycle tomorrow? Who is going to pay the driver tomorrow, and who is going to replace the motorbike when it breaks down? Are you going to continue pouring money into that piece of infrastructure or are you going to deal with the core problem of when a person feels sick or wakes up wanting to deliver a baby, they know what to do and they can do what needs to be done?

Martin Riant | Find the common interests

How do you connect what the business needs to do to keep its shareholders happy with how we can do some good that's consistent with either a brand or corporate mission? In Nigeria right now, we're learning how to use mobile phones as a primary marketing tool. There is a natural synergy between reaching the population with necessary heath messaging and with information about the products and services we offer. It comes down to this: If we have very clear opportunity to grow our business, it will be a sustainable model because there is a common interest—it's not philanthropy. Rather, it's very much motivated by our need to connect with both potential and existing consumers—the same people in the same countries where we need to reach out to provide health education...

In our case, the power to choose where to invest is with the brands, the big billion dollar brands. So if we're going to do anything, it has to be in the business model of those brands. One opportunity we had was teaming up with UNICEF to provide a vaccine for every diaper pack purchased in a certain time frame. Pampers is a huge international brand. So when we do a campaign like this, we have a huge impact-around 300 million vaccines so far and over 100 million mothers and their babies protected. But the point here is that we're now in our sixth consecutive year of the programit's sustainable. The reason for this is that our customers love it: they compete with each other to up the offer. They get behind it, they share it, and it builds our mutual business. We also build our reputation as a brand and a company as a responsible corporate citizen. So I think that every time we want to move forward, we have to look at where the business opportunity is-where is the need, and how can we connect the dots and put the two things together? That way, the model can work and be sustainable.

.....

It will be a sustainable model because there is a common interest—it's not philanthropy. Rather, it's very much motivated by our need to connect with both potential and existing consumers—the same people in the same countries where we need to reach out to provide health education...

-Martin Riant





How can businesses whose core business is not overtly focused on mothers and babies still contribute to improving MNH? Are there any notable examples or areas for engagement?

Jerry Wilson | Empower local populations through creative business models

.....

• It is important not to default to thinking of big, multinational companies like Coca-Cola as a bank or financial institution for projects. What we find is a much bigger and more sustainable idea, where we can take our capabilities and actually build sustainable living platforms for women and communities. We operate a franchise system—we go to market through our Coca-Cola bottling companies all around the world. These bottlers are very capable at getting our products to all kinds of nooks and crannies. Through a creative business model, in response to the UN Business Call To Action, we developed micro-distribution centers in eastern Africa. Now we have over 3,000 independent operators in Africa that employ anywhere from 18,000 to 20,000 people. Multiply that figure by five to get the number of people who are actually impacted. The interesting thing that we've seen is that almost 40% of these businesses are either woman- or couple-owned. We're finding that one of the best things we can do in this area is help to eliminate poverty. By attacking poverty head-on with our specialized micro-distribution model, we're empowering women, families, and communities to actually build lives and escape some of the oppression that they're living in today. ... It comes back to that core capability.

.....



Andrew Witty | Stimulate political support

Political will is where I think business can potentially play a very important role. I think most people would agree that big business is pretty good at lobbying in its own interests. Wherever you go in the world, you'll hear people talk about business and big business influence. Now is not the time to justify that case or not. The point is that big business is good at lobbying, so what can we do with that? We're already good at developing products for the West. Can we focus on developing products for people who need them in the developing world? One contribution that big business can make, in addition to products and access to ideas, is to help stimulate governments and other bodies to really think through the overarching frameworks of policy to help governments ensure that they don't cut development aid programs when everything else is in question. Business can play a very constructive role by applying the skill set it depends on for its core businesses to development.

Ali Mufuruki | View people in the developing world as consumers

Stop looking at people in the developing world as mere recipients of other human beings' goodwill. View them as participants in a marketplace, in the global healthcare value chain. We also need to change our mindset from being overwhelmed by the magnitude of the problem. There are scary statistics that are just unfathomable. But ten years ago, the global telecom industry didn't believe that you could do business in poor economies, so they never looked at people in the developing world as market participants. The phone was just a rich man's tool. But today, thanks to innovation and a very radical change of mindset, the telephone is every human being's survival tool. How has this happened? It happened by people realizing that to make sophisticated and expensive products available to poor people, you don't necessarily have to reduce the price and therefore reduce the incentive for you to be in that business. You can break down that product into the pieces that poor people can afford.

Back to the mobile phone: it is possible today to buy airtime vouchers costing as little as US\$0.50 anywhere in Africa to make a phone call to any part of the world. Now, can we imagine electronic micro-insurance vouchers that people can buy and invest in over time? We need to create a model that is able to receive those kinds of funds; we need to create a system that is able to track them. Governments can't do it alone.

[Mobile phones in the developing world] happened by people realizing that to make sophisticated and expensive products available to poor people, you don't necessarily have to reduce the price and therefore reduce the incentive for you to be in that business.

-Ali Mufuruki

How do NGOs and academicians build a compelling case to business leaders to incentivize industry engagement in MNH beyond a CSR model? In which areas of MNH does the global health community want to see industry become more involved?

A. Martin Riant | Connect with chief motivations of businesses For most companies, we've got our websites, we're talking about what we're doing, and why we're trying to do it—it's reasonably easy to figure out whether the company's motivation and focus matches the NGO agenda. Connecting the dots between a business's motivation and how that can translate into engagement is the opportunity. Linking to a company's business interests is a much more productive and sustainable approach than asking for donations and support.

Kevin Jenkins | Demonstrate the value and "fit" of a partnership to a business

How do we respond to serious needs of the world's poorest mothers and children in a way that goes beyond anecdote, beyond something to put on the business's website? Scalability and sustainability are important. For GlaxoSmithKline, Procter & Gamble, Coca Cola, or anybody, even in the developed world, to get a product that's both scalable and sustainable is hard work. Now do that in the poorest communities in the world, where there is little or no infrastructure—that's a high bar and not something you just want to be throwing out as a concept. If you're going to persuade a serious business about the possibility, you're going to have to clarify how and why some of the most obvious barriers can be overcome. ...



Partnerships are very complicated. If a business is going to partner with you, they have to really be persuaded that it's a good fit with their particular interests, and that you're a reliable partner. Things won't go anywhere if you are not clear about intentions or actions. Learning how to develop a fit with business is almost as basic as understanding your audience.

Leslie Mancuso | Galvanize the business sector for problems around birth

The number two reason women die in the world is preeclampsia¹... There are many solutions; we just need to get them out. We not only need to figure out how to detect the condition, we need to figure out how to detect it early enough so that women aren't having seizures by the time they arrive at the clinic. ... When I meet with business leaders and I mention preeclampsia, they look at me blankly. For those of you from developed countries who have wives or sisters, they were all screened, their blood pressures were checked, their protein was checked, they went through a whole screening—women in the developing world do get to an antenatal clinic but they don't get that level of care. At the same time, workers in health facilities may not have the training on how to screen or the resources on-site to screen. ... There's a lot of discussion about which hypertensive drugs to use; there's a lot of research done but not conveyed at the health facility where the woman comes in for her antenatal checkup. So if you take the situation of preeclampsia as one example of an MNH problem to tackle, how do we galvanize the business community around it? This issue needs to be resolved so we can save women's lives; how do you answer that call?

¹ Preeclampsia is a condition marked by a sudden increase in the blood pressure of a pregnant woman after the 20th week (late second or third trimester) of pregnancy. It can affect the mother's kidney, liver, and brain. If left untreated, preeclampsia can be fatal for the mother and/or the baby or lead to long-term health problems. Source: "Preeclampsia and Eclampsia," National Institutes of Health, Eunice Kennedy Shriver National Institute of Child Health and Human Development, webpage, http://www.nichd.nih.gov/health/topics/Preeclampsia_and_Eclampsia.cfm.

.....



Q. What business strategies can non-industry players borrow from industry to bolster their work in this field? How can different players' agendas become better aligned across sectors?

Kevin Jenkins | Set achievable deadlines

I want to focus on the power of deadlines. The MDGs [Millennium Development Goals] had a fifteen year deadline. I think we've proven that long deadlines don't help. People find it hard to think in terms of fifteen year deadlines, but a five year deadline has real power to inspire action. This is a moment in history that we are unlikely to get again, a once-in-a-generation opportunity to do something dramatic to address an injustice inflicted on mothers and young children. If there is social capital, if business is as good at advocating as panelists have said, I would appeal to businesses now, appealing to the heart. As citizens, we've seen how little we've done in ten years—can we get committed around the UN Global Strategy for Women's and Children's Health in the next three months, so the next five years will be a lot more valuable?

Jerry Wilson | Brand the cause for your target audience

Are you thinking about your business as a business? Are you thinking about your cause as a need? Who is your target audience, what is your brand, and how is your brand uniquely positioned against your target audience?

> We need to be thinking of health not as a right, but as an investment.

> > -Babatunde Osotimehin

Babatunde Osotimehin | Regard health as an investment

We need to be thinking of health not as a right, but as an investment. We have been driving health as a social good, but without the investment edge. If we instead view health as an investment and engage the private sector, who comes on board not as competitors but instead as our partners, we can talk about national, not government, planning. Most countries that you deal with don't have a sound plan for investing in health, so a costed plan is probably the most important path, including planning and implementation.

Martin Riant | *Choose your priorities strategically*

The key to improving health is to make the right strategic choices. One thing that we find is that it would be easy to say yes to everything, but if we can focus, which means saying no to some things, we can start to have real impact.

Many of the greatest challenges for MNH are found in regions and countries where there historically has been corruption within governments. Is it possible for business to work in this type of environment?

Andrew Witty | Partner with NGOs to help mitigate risks

Systemic corruption is a massive debilitating force. It creates a barrier between companies and government because companies, particularly international companies, are very wary of getting drawn into that kind of risk environment. Those types of places are where NGOs play a tremendous role, and it's why you find that many international companies operate primarily with the NGOs in the country. In places where this corruption issue has receded or never existed, you see very significant engagement between companies and government. But where corruption does exist, I think companies are rightly extremely cautious about working directly with governments, because the negative consequences for companies, both in the country and in other international environments, are far too great for them to risk.

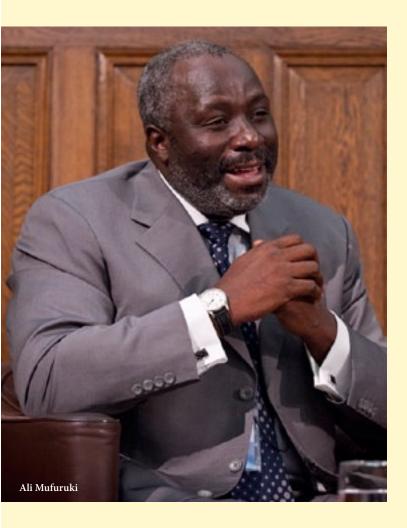
Ali Mufuruki | Privatize and integrate into the larger value chain

When telecom companies were nationalized, there was a lot of corruption and we didn't see a lot of progress in that industry. Since we've taken this business private, look what has happened. While I don't think that the solution is to work exclusively with NGOs, I do think we need to consider integrating local business into the whole value chain. There is a lot to be gained—we need to open our eyes to that.

Rural women self mango and sweet potato jam at the food processing shop in Bantantinnting, Senegal. They produced the jam with the assistance from the United Nations Development Program. How can businesses contribute to ensuring that innovation, products, and modern technologies for MNH reach those people most in need of them?

Andrew Witty | Understand the whole system challenge

It's all very well to invent products and technologies, and offer them to people, but we must ask: Are we smart enough to figure out how to ensure that they have access to those technologies? Are we really going to invest the energy required to think through the whole system challenge that exists? Because as we all know, it's not simply about having a technology, drug, or vaccine intervention. Rather, it's how do you make that intervention happen at the right moment in the system, so it actually has a benefit and isn't just a gesture without consequence? How do we make sure that we understand the existing system, and how do we work with it? How do we make sure that the human resources base and distribution capacities are in place? It's really no excuse to say that we invented a product but that it's someone else's fault that no patients ever actually saw that product. That's an inexcusable reason for failure. This is something that we have to really focus on in a business—you have to take a share of the accountability to understand how the system needs to evolve in order to deliver the particular technology or intervention that has value for the people involved.



Martin Riant | Engage directly with the consumer

Where is the global infant mortality level now? I think the answer is something like 86% of the global burden is in 68 countries, and 56% is in only six countries. I was interested to find out which are these six countries. For some of these countries, the problem is size-based, and they comprise the usual suspects-China and India, but also Nigeria, Ethiopia, Bangladesh, and Pakistan.² ... Those countries will be Pampers' biggest markets in the next two or three decades-not the UK or Germany. We're manufacturing there, we're talking to consumers there, learning and understanding their needs. We're out in the villages, and we're figuring out how to distribute our products. We now need to talk about the health education that we need to be providing along with access to products and services.

Ali Mufuruki | Build coalitions across sectors

A coalition of the willing cannot only include companies, NGOs, or governments; rather, it needs to be all of those groups together. How that realistically gets done and makes an impact is still a conundrum. It's incredibly easy to address really difficult questions with philosophical responses. We bounce up to the global level and we end up with truisms, which are very difficult to measure and go on forever. Our work is all very worthy, but nothing ever happens. We bounce back down to the village level

.....

and we end up with anecdotes and things that actually do make a difference, but they make a difference only for a very small number of people. So the question is, "How do we properly build such a coalition?" So how we get really disciplined around what we can practically make happen is a key challenge. What I'm asking for is behavioral changes rather than events. For me, the Pacific Health Summit is a really important potential opportunity to build that coalition at the most appropriate level.

² Joy Lawn, Jelka Zupan, Geneviève Begkoyian, and Rudolf Knippenberg, "Newborn Survival," in Disease Control Priorities in Developing Countries, 2nd ed., ed. Dean Jamison, Joel Breaman, and Anthony Measham (Washington DC: World Bank, 2006), 532. Ony 1744

A community midwife in Badakhshan, Afghanistan ises postpartum family planning flip card during ier counseling session in a basic health center.

Q. Healthcare workers and health system capacity are critical factors in determining MNH outcomes. Where do nurses, midwives, and other healthcare workers at the community level fit into broader business strategies or activities? How do local community members themselves fit into these actions?

A. Sheri McCoy | *Invest in frontline health worker education* It's not good enough to just develop the product. If we look at Johnson & Johnson's baby business, if we look at our pharmaceutical business, what we recognize is that the people who influence, namely the nurses or midwives, are the ones who are absolutely critical to getting the necessary care to the patients or to the moms. From a business perspective, I think it makes tremendous sense for us to invest in training and invest in education, both at the surgery level as well as regarding care for babies.

David Boyd | Provide a framework for a team-centered approach

In some countries, we've managed to start bringing together the Ministry of Health and the delivery teams for training courses. We've brought people over to our training center in the USA and also replicated that type of program in our target countries. What that's doing is making people work better as teams. It sounds very simple, but quite often you have very hierarchical structures in which a good idea further down in the organization will just not be able to move up. We've provided a way for that to happen. There may be many companies that will have that ability in their own training programs, which we could all then share with the countries to start changing the way that they work.

Jerry Wilson | Empower women through business ownership

In order to better MNH outcomes, we must empower individual women. It starts with assessing the market and then identifying skilled people in those markets we can develop into self-sustaining business leaders. These people are generally near the top of a poverty line-they're in a poverty zone. By assessing the market properly, by identifying the right kind of owner-operator-the mindset that we're looking for-we can then implement a training and development program and a start-up finance kit to help them get a business going. Then we help them with sales tracking, inventory, logistics, and supply chain matters. It's a big change for an individual because they've gone from carrying water to the family home to running a business. We have found that the willingness and the drive are clearly there, and once they taste this new world, there's empowerment-there's a different person in the same skin. And it has a contagious effect on the families and the village.

.....



Looking to the future, in five years where do you hope things will be in terms of industry's involvement and investment in MNH? What are the key elements to realize these visions?

I would like us to be seen in some of our priority markets as an indispensable partner, both as a brand and as a company on improving maternal and newborn health.

-Martin Riant

A. Martin Riant | Combine business needs with education and health

I would like us to be seen in some of our priority markets as an indispensable partner, both as a brand and as a company on improving maternal and newborn health. I want to give you one very tangible example of how this can come together, because it's easier to talk concepts with something concrete. A while ago I was in Nigeria, where we have mobile clinics. We have a little green van; it has the Pampers logo on the side and a pediatrician with it. We arrive at the village at a scheduled time. Immediately there are swarms of mothers and babies around this van and while they're waiting to see the pediatrician, and we tell them all about Pampers, as you'd expect. It's a great opportunity to talk to them about childbirth and childcare, whatever we think is a priority to talk to them about from a health education point of view. Then in the surrounding area, we've got distribution of our products, with the small stores selling Pampers. It's a great example of how you can put together education, health needs, and a business. ... I would love to be able to do that on a larger scale in more places, and I think with partners we could do it.



Ali Mufuruki | Technologies as a catalyst for improvement, health centers as sustainable and locally owned businesses Five years is a short amount of time to train a doctor or a nurse or build a road or even a hospital. However, I hope that five years from now, through increased use of currently available technology, we will have fiber optics networks covering almost every district in my country, as well as for Kenya, Uganda, and Rwanda. I hope that it will be possible for many more people, not only the elite, to have electronic bank accounts from which they can buy micro-insurance products and drugs; that there will be thousands of diagnostic centers across the country with very high-level technology, where doctors from both cities and remote locations overseas can look in and analyze and diagnose patients, again, over communication networks and give advice and results. I think that these are real possibilities. Finally, I hope that health centers will be owned by private business people who will be able to make sustainable livings by running them.

We need to be focused remember that we can't do everything. ...We have to concentrate on the highest priorities in order to achieve concrete goals in a reasonable amount of time.

-Andrew Witty

Jerry Wilson | Adapt different models to different markets

It is important to recognize that one size doesn't fit all. We need to be open to innovative solutions, to new ideas, and to the needs of communities around the world. It's also important to recognize and leverage core capabilities—how can we put the right kinds of services within arm's reach of the neediest people?

Andrew Witty | Focus on key priorities

We need to be focused—remember that we can't do everything. We have a lot of parallel agendas, all with high priorities, but when we put them all together, we end up trying to prioritize everything at once while on a super-long deadline—I think this is a risk. We have to concentrate on the highest priorities in order to achieve concrete goals in a reasonable amount of time.





PART III: WHERE DOES AN INTERESTED COMPANY START?

Begin internally.

- How can you support the mothers in your workforce?
- How can you support the families of your employees?
- How can you promote the dissemination of accessible, understandable health information within your workforce?

Assess opportunities in your core business.

- Can you integrate MNH across the span of your company's communications and advocacy, information and communications technology, equipment and drug R&D, and logistics and supply chain management?
- What are you already doing that could make an impact on MNH?

Become a part of the movement.

• Engage with leading international NGOs and multilateral institutions active in MNH to explore creative business opportunities.

Stay informed.

 Numerous organizations exist purely to provide information about crucial MNH issues. For a list of pertinent organizations that specialize in MNH, visit: <u>http://pacifichealthsummit.org/initiatives/MNH/</u> organization.aspx

Consider the 2010 Summit Calls for Collaboration as examples or entry points.

- A group of 2010 Summit participants have submitted *Calls for Collaboration* (<u>http://</u> <u>www.pacifichealthsummit.org/downloads/</u> <u>CallsforCollaboration.pdf</u>) each of which offers a specific, tangible, and immediate opportunity for business to become engaged in MNH.
- These *Calls* provide entry points for interested companies to the people and on-the-ground organizations that have made MNH their life's work and are open to creative forms of engagement with new partners.