

Accelerating Healthcare Access

Globalizer Summit Report

21-22 June 2018

Eindhoven, The Netherlands



Philips
Foundation

INTRODUCTION

When business leaders with industry skills and social entrepreneurs with innovative solutions collaborate, increased healthcare access for people around the world can become a reality. Together, Philips Foundation and Ashoka have launched Accelerating Healthcare Access (AHA!), a multi-year collaboration with exactly this goal: to bring together leaders from Royal Philips and leading social entrepreneurs (Ashoka Fellows) in order to explore collaborations that will make quality healthcare more accessible in disadvantaged communities.

At the heart of the collaboration is the desire of Philips Foundation and Ashoka to leverage their respective complementary expertise in social innovation and systemic change and business solutions of scale and technological advancement, with the ultimate goal of narrowing gaps in access to healthcare. Be it medical issues like maternal health, chronic conditions or issues of affordability and infrastructure, Accelerating Healthcare Access will innovate and connect new solutions that close the systemic gaps that have long plagued the growth of a quality healthcare ecosystem.

In this context, Philips Foundation and Ashoka organised the first Accelerating Healthcare Access Summit in Eindhoven. The four-day event took place from June 20th to June 24th, convening a large and diverse group of actors in the healthcare ecosystem. Fourteen Ashoka Fellows were joined by industry experts, healthcare leaders, businesses and citizen-sector organizations to step into the next paradigm for accessible healthcare.

This report that you have in your hands synthesises the key insights and impact from both the Ecosystem Day (June 21st) and the Globalizer Accelerator Day (June 22nd) of the Summit, this latter section including an overview of each of the innovations of the 14 Accelerating Healthcare Access Ashoka Fellows and the main challenges that they're working on at the moment. We hope you enjoy reading it. For more information on the Accelerating Healthcare Access collaboration, please visit our website aha.ashoka.org

TABLE OF CONTENTS

ECOSYSTEM DAY, 21ST JUNE

04 Overview of Ecosystem Day

05-06 Systemic Barriers to Healthcare Access

07 Keynote: Rethinking Healthcare Models

08-09 Panel: Strategies to Transform Healthcare Access

10-11 AHA! Solutions: Stories of Systems Change

12-13 Keynote: Collaboration & Finding your Role in the Systems

14-16 Key Learnings

17 Impact

ACCELERATOR DAY, 22ND JUNE

18 Overview of Accelerator Day

19 STP Reflections

20-33 Fellow Profiles

34 Fellow Reflections

35 Impact

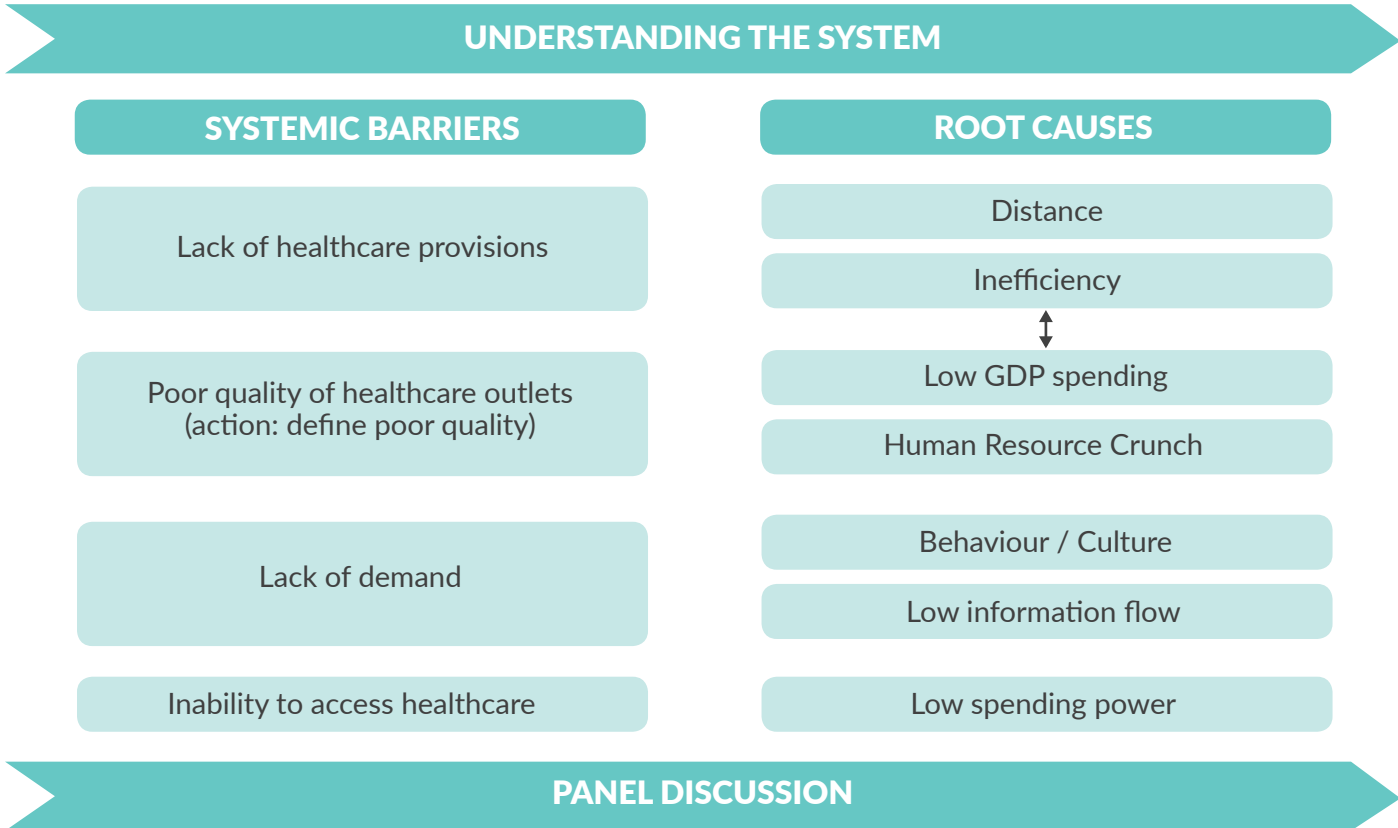
ECOSYSTEM DAY

OVERVIEW

The Accelerating Healthcare Access ‘Ecosystem Day’ on June 21st was a full-day, learning platform where experts from diverse fields engaged with some of the world’s leading social entrepreneurs on systemic and collaborative solutions to reduce health inequality across the world. The day was aimed at bringing people with experiences, expertise and opinions together for a cross-sharing of ideas, knowing that no complex problem can be solved alone. Only an ecosystem of different players working together can scale, iterate and spread solutions beyond people and organizations, embedding them in the system for long-lasting and effective impact.

The morning focused on bringing different voices to the room to understand the systemic barriers to accelerating quality healthcare access in emerging markets, and showcasing inspiring models of how this is being done through social entrepreneurship and innovation.

In the afternoon participants split in breakout groups to explore challenges and opportunities with select Ashoka Fellows whose outstanding work in reducing health inequalities has impacted millions of people globally.



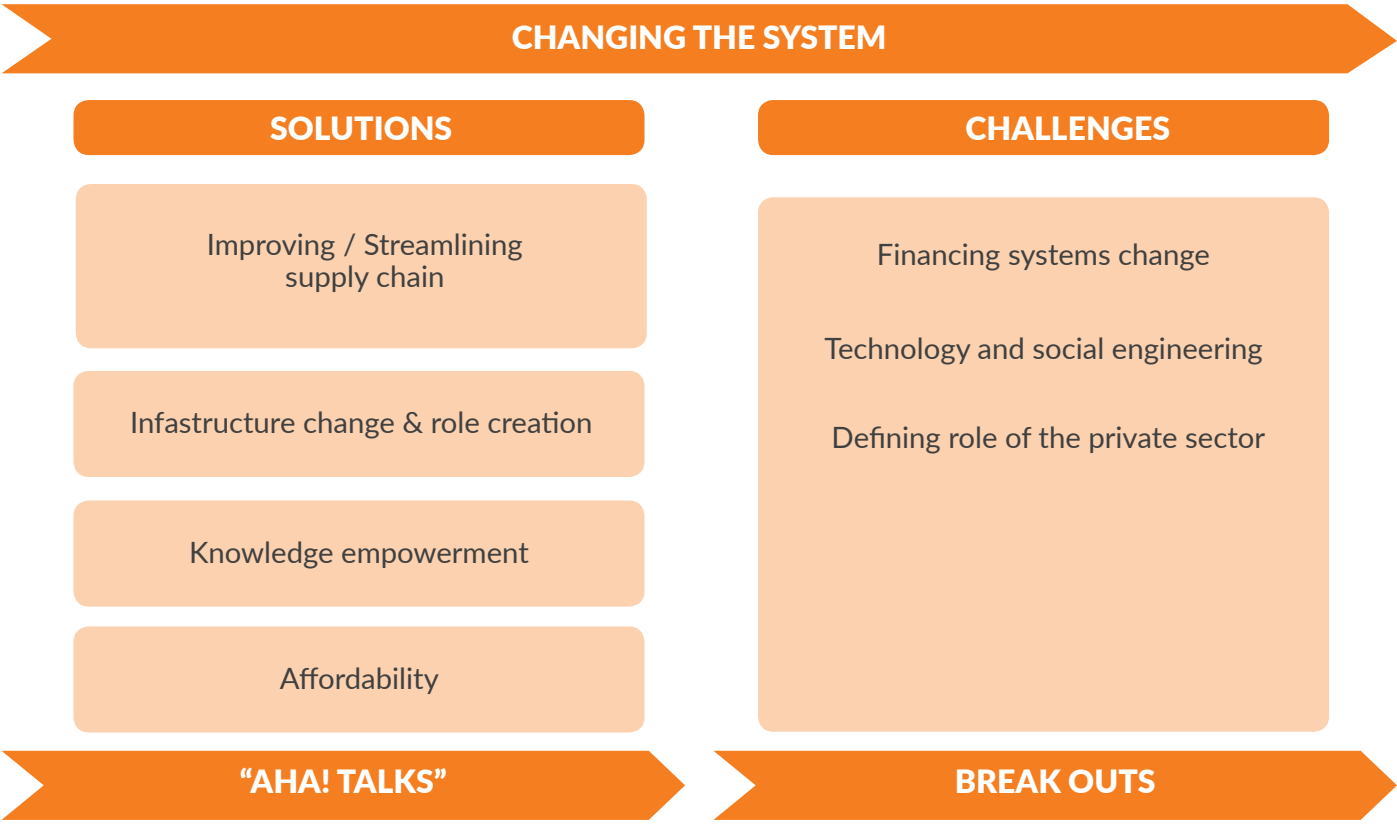
ECOSYSTEM DAY

SYSTEMIC BARRIERS TO
HEALTHCARE ACCESS

In order to design the Ecosystem Day, the Accelerating Healthcare Access team worked with senior healthcare Ashoka Fellows and leadership at Philips and the Philips Foundation to identify and map the key systemic barriers preventing healthcare for all, and the different buckets of solutions that are tackling the root causes of these barriers. This work is reflected in the following system map, and informed the structure and the content for Ecosystem Day.



Ultimately the day aimed to spark conversation and exchange between attendees about barriers and solutions, while sharing the messages that a systemic approach, collaboration, and empowerment models are key to effectively addressing the complex challenges of access to healthcare for disadvantaged communities.





“When you look at the key challenges society is facing it becomes increasingly clear that public and private sector need to join forces. Social entrepreneurs will be key in coming up with innovative ideas [and] challenging existing paradigms”

RONALD DE JONG, ROYAL PHILIPS
AND PHILIPS FOUNDATION

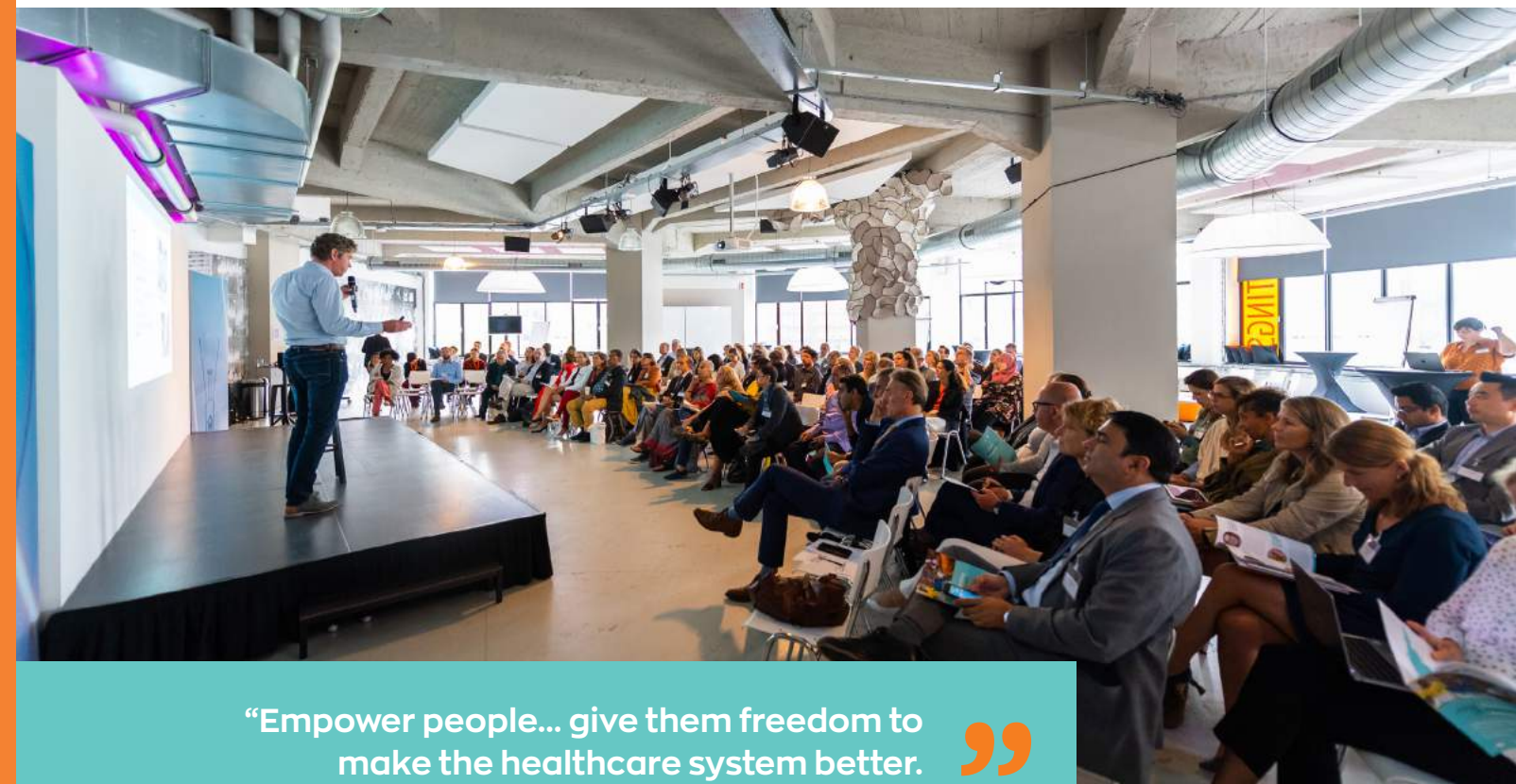
ECOSYSTEM DAY

KEYNOTE: RETHINKING HEALTHCARE MODELS

Ard Leferink, co-founder of Buurtzorg and the keynote speaker for the morning framed the day for us to start by rethinking healthcare through the lens of empowerment.

Through Buurtzorg, Ard and his co-founder Ashoka Fellow Jos De Blok have re-defined the role of nurses in the care system, and by empowering them, created a self-run, self-motivated and highly efficient organisation. Ard, in his keynote, spoke about how 80,000 patients were being looked after by 10,000 nurses within the Buurtzorg ecosystem, fueled by agile leaders and teams who came from inside the nurses' communities. The lessons from Buurtzorg on how we design models of care and how we design more human systems are now finding relevance across the healthcare industry globally.

This narrative of empowerment across the system—of patients, doctors, nurses, health workers, businesses and citizens—emerged as a strong theme in discussions throughout the day. Empowering and equipping everyone in the health system to deliver better care, creating new roles for people and freeing health systems from inefficiencies and corruption through new, adaptable technology were ways in which the 'ecosystem' thought healthcare services could break barriers.



“Empower people... give them freedom to make the healthcare system better.”
Ard Leferink, Co-Founder, Buurtzorg

ECOSYSTEM DAY

PANEL: STRATEGIES TO TRANSFORM HEALTHCARE ACCESS



Ard's inspiring speech took us to the heart of the challenge—what's broken in our healthcare systems that needs fixing? To answer this question, we invited five experts from different parts of the healthcare ecosystem to shed light on the complex and interconnected challenges that are limiting access to quality healthcare. Here the panelists went beyond the problems their organizations face in the field to look at the underlying root causes that are affecting the whole system. We heard from panelists—Rita Melifonwu, founder, Stroke Action Nigeria, Asher Hasan, CEO, Naya Jeevan, both Ashoka Fellows as well as Danny Dubbeldeman, Business Development Manager at Amref, Christoph Castellaz, Business Leader, Primary and Community Healthcare solutions for Royal Philips, and our moderator Simona Rocchi, Senior Research Director of Innovation and Design-for-Sustainability, Philips Design—about the complexity of systemic problems, and the need to look beyond silos of individuals and organisations. The key, they concluded, was to find bring different stakeholders on board from the beginning, to identify and solve the root challenges, and bring a variety of voices to attack a problem holistically.



“We need an ecosystem approach, because all of us cannot solve such complex problems alone. Single interventions for the right purpose need to come together.”

Christoph Castellaz,

“ A combination of demand and supply is necessary. If you organize the demand side better—help seeking behavior, informing, insurance, how to organize primary care, you need to make sure that the (supply)system is responsive to that. ”

Danny Dubbeldeman,

“ Private partners will help social entrepreneurs scale. And they will do this through their core business, not as CSR. There are powerful market-based reasons, to invest in healthcare access and innovation. We need more inclusive business approaches. We need to co-create these new systems with the beneficiaries, be agile and adaptable.”

Asher Hasan

“Even when working outside the regular system, you can still be effective. We collaborate with hospitals to ensure access to stroke survivors but are not fully limited by the way they work. We now plan to try work with Government in the same way. ”

Rita Melifonwu

ECOSYSTEM DAY

AHA! SOLUTIONS: STORIES OF SYSTEMS CHANGE

The Social Entrepreneurs that shared their innovations with the audience are also 'system' investigators; looking to find and tackle the root cause of a problem instead of its symptoms. The solutions they then bring to the sector are systemic, long-term and collaborative. Most importantly, they empower the people experiencing the problem to be part of the solution. We invited our Fellows to speak about their social innovations in improving affordable and accessible healthcare access in emerging markets.

From re-inventing roles for people to fixing gaps in the supply chain, the 'system change stories' gave the audience a taster of the change that is happening across the sector, their ambition and innovation for system impact and their important calls to action.

Improving & Streamlining the Supply Chain

- Oliver Bogler: Using technology to reduce disparities in care for patients with common chronic diseases, who do not have direct access to healthcare specialists.
- Abdelaziz Allabadi: Built the Arab world's first Arabic website on medical information and access to GPs for low-income, disconnected communities.
- Carlos Atencio: Revived family medicine as a norm in communities over specialised, expensive and unaffordable care.



Infrastructure Change & Role Creation

- Armida Fernandez: Re-orientes limited resources in the healthcare system to craft programs for mothers and children.
- DY Suharaya: Created Indonesia's first comprehensive advocacy campaign on Alzheimer's for survivors and supports to have a voice.
- Shona McDonald: Integrated children with mobile disabilities into society through customising their physical support, spreading knowledge and awareness and building the capacity of the system to welcome them in.

Knowledge Empowerment

- Hilmi Quraishi: Gamified essential health messages and knowledge to influence and empower women with better health behaviours.
- Prasanta Tripathy: Built peer networks of women in tribal communities to understand the complex reasons behind disease and death in their communities and find their own solutions.
- Edith Grynszpancholc: Empowered parents of children with cancer with knowledge, tools and the power to make the system work for them.

Financial Accessibility & Affordability

- Amr El Tayeb: Built an efficient, end-to-end and affordable care system for disconnected communities
- Javier Lozano: Created a low-cost, one-stop-shop clinic to treat diabetes and prevent the complications associated with the disease.

ECOSYSTEM DAY

KEYNOTE: COLLABORATION & FINDING YOUR ROLE IN THE SYSTEM

The second half of the day focused on unlocking the potential of collaboration to join, empower and scale both the social innovations discussed during the day. Jeroo Billimoria, a senior Ashoka Fellow and serial scaling expert, known globally for her work in Youth Empowerment shared her experience on working with partners at a global scale.



She shared that there have been common threads in her 3 different initiatives in scaling social impact: it took approximately 3-4 years to scale globally (to over 100 countries), all efforts involved a budget of about \$2 million and all have changed systems in the fields that they operate.

Her formula—the 5 Cs—for “collaborative system change” involved key insights on how local ideas can become big, paradigm-shifting movements and networks.

The 5 Cs for ‘collaborative system change’ as told by Jeroo:

Co-create

Stop trying to do it alone because you will reach your own limits. Collaborate with every target group you have to work with and co-create your strategy with them.

Connect

Find the right people and connect them. Take time to play that role for the sector.

Convene

In person meetings are important and essential to build relationships that spark collaboration

Celebrate Success

Create moments for celebration of success. It motivates and inspires more action.

Calibrate

Document everything to build your case and create a very strong Monitoring & Evaluation System

ECOSYSTEM DAY

BREAK-OUT SESSIONS

And with that last piece of inspiration, our participants were ready to roll up their sleeves and dig into the break-out sessions based around questions and challenges sourced from our Fellows. A diverse and enthusiastic crew broke down these challenges around three major levers in the system, which when worked, can open a floodgate of innovation:

Adaptable Technology and Social Engineering

- How can we combine information technology with high-touch community models to work at scale?
- How can we build a “mega-ecosystem” of tools for innovation in increasing healthcare access?
- What are some of the strategies for health coverage of last mile populations, particularly in regards to achieving behaviour change in a low-cost manner?

Financing System Change

- How can we develop incentives and sustainable business models for volunteer care providers, especially in rural areas?
- How do we get long-term funding commitment for structured community capacity-building interventions?

The Role of the Private Sector

- How can we optimise corporate value chains to market, distribute, deliver and co-finance digital health innovation, in a way that exponentially expands access to quality, affordable healthcare in emerging markets?
- What are the competitive advantages that a social enterprise can add to the digital space in healthcare?



ECOSYSTEM DAY

KEY LEARNINGS



“When you want to change a system you cannot do it alone. We need to embed innovations through a more holistic approach and use the strengths of every party.”

Danny Dubbeldeman,
Manager Business Development, Amref



large mobile service providers, like Vodafone, to share health information with communities illustrated the point. Participants explored the role of *trust and openness as levers* that make these win-win partnerships truly successful.

The need for *technology to play a 'platform role'* was a consistent topic throughout the groups. Participants saw that technology had the power to inform many at the same time at lower costs. In a world where data is now the most valuable commodity, these platforms can also address demand-side gaps with communities providing information through mobile apps that, at an aggregate level, can help health experts, workers, entrepreneurs in innovating solutions faster and with more accuracy.



The afternoon break-out sessions and brainstorming activities led to a number of thoughtful insights and key learnings (and amateur drawings!). There was consensus about how it is pivotal to bring a whole host of ecosystem players together to change mindsets about the healthcare practices that impacted them.

Inform and Influence is a key strategy, as one group pointed out, for strengthening local demand for better health care facilities, and demanding that the last-mile health infrastructure is fixed, trained and well-equipped to serve the needs of the people.

The high and ubiquitous penetration of mobile phones in emerging markets was also discussed as a new fulcrum to build win-win partnerships. Leveraging the use of

A crucial learning emerged around the concept of *sustaining system change*. Care workers and volunteers are at the backbone of the healthcare system and their roles need to be recognized and supported.

One group shared their common experiences with building incentives and sustainable business models for volunteer care to address the challenges of sustained, sustainable and scalable volunteer capacity. They discussed the different motivations and needs that drive volunteers to take on responsibilities for their communities as well as other systems at play that might block those kinds of commitments, that are worth acknowledging and addressing. They agreed that investing in people is essential, however participants also discussed how to create a transition or succession plan for volunteers that leave to ensure the ‘engine of impact keeps running’.

Participants also discussed the proverbial ‘win-win’ arrangements between social enterprises and corporate partners, and how these need to be based on a *common objective of scaling social good*. They spoke about tying in the larger vision of universal healthcare with on-ground data and scaling strategies provided by for-profit partners to get the join goal faster.

With robust dialogue, Ecosystem Day participants identified new areas of business and social sector collaboration to empower communities, transform sectors, and increase healthcare access for those who need it most.



ECOSYSTEM DAY
IMPACT

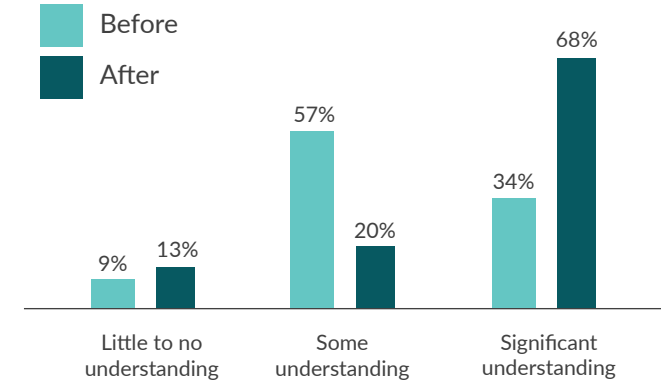
92.8% Attendees who would recommend the event to a friend

81.5% Attendees who reported expanding their network through meaningful connections on Ecosystem Day

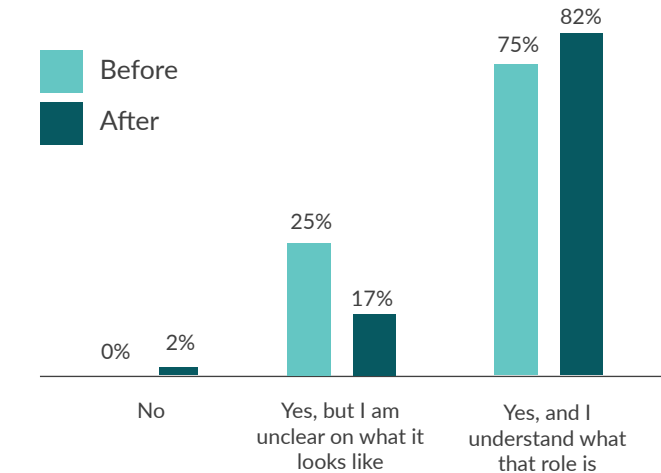
81.1% Attendees who reported leaving Ecosystem Day with specific ideas or new opportunities

77% Attendees who plan on following up with three connections or more (up to 12)

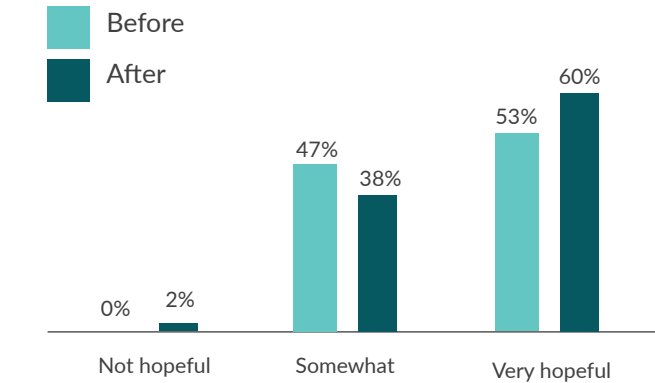
To what extent do you feel you understand the complexity of the challenges around access to quality healthcare for low-income communities?



Do you feel that you or your organisation have a role to play in increasing access to quality healthcare?



How hopeful do you feel about creating a world where quality healthcare is accessible to all?



ACCELERATOR DAY

OVERVIEW

Founded in 2010, the Globalizer Program is an Ashoka initiative that supports social entrepreneurs spread their impact more broadly and efficiently by helping them strengthen and deepen their vision for systemic change. The social entrepreneurs participating in the program are encouraged to reflect on the strategies and the leadership skills they need to scale their innovation and generate widespread impact in a world characterized by constant change.



Ashoka Fellows participating in the Accelerating Healthcare Access Globalizer program followed a 4-month advisory process from February until May where they reviewed and develop strategies to scale their impact to a systems level. Business experts and Philips leadership served as advisors to the Fellows, providing them remote consulting and support through the months. This process is then followed by the Accelerator Day, which took place in June 22nd—a day where Fellows met with senior entrepreneurs and business leaders to review their strategy and address key challenges.

The 14 AHA! Fellows got together with 23 Strategy Thought Partners (STPs) on this Accelerator Day in Eindhoven. STPs immersed themselves into the Fellows’ scaling plans and offered new perspectives to their model, potential for partnerships and key contacts.

Each Globalizer participant presented their scaling plans and key challenges in the morning. After introductions to the fellows, the day continued with one-on-one conversations with a selected group of STPs: leading entrepreneurs, executives, mavens and experts from the private and social sectors. The day finished by coming together to share key learnings in groups and come up with ideas to help Fellows implement their strategies.

The following pages present an overview of the models of each of the 14 AHA! Fellows, their key challenges before the Summit, and their key take-aways after accelerator day. For an indexed list by Fellow, please refer to the table of contents in page 4 of this report.

ACCELERATOR DAY

STP REFLECTIONS



“ This was the most wonderful event. I’ve been to so many events with entrepreneurs as a judge or evaluator but this was different because you put the entrepreneur in the driver’s seat. And that is so powerful.”
Christina Wadhwani

“This day inspired me, I now have 1000 ideas on what more I can do to create impact.”
Annette Jung

“ I feel energized, it was fantastic! It is refreshing to see what actually happens in the field and to see impact in action. I am sure I have learnt so much more today, than I could have impact. Thank you.”
Walt Johnson

“I was happy to work with the particular fellows, all of whom are exemplary each in their own way. I came away from the accelerator with a feeling of contentment and hope.”
Chris Underhill

“ Today, we were able to fully benefit from each others’ knowledge and network, skills and assets. Whether by connecting ideas, sharing a phone number, or simply listening. I am totally inspired and overwhelmed.”
Margot Cooijmans

“The Accelerator Day blew me away. It was inspiring and humbling to work with the social entrepreneurs and engage with their drive. I am used to helping entrepreneurs become financially successful, but this experience was so much more valuable.”
Alberto Prado

FELLOW PROFILES



**ABDELAZIZ ALLABADI
& JALIL ALLABADI**
ALTIBBI, JORDAN

SNAPSHOT

Abdelaziz Allabadi and Jalil Allabadi are increasing access to medical information in the Arab region through Altibbi, an online medical dictionary, medical reference, medical portal and medical assistance all in one site—all in Arabic and all authenticated. Altibbi is a truly comprehensive source of medical information and includes medical terms, health subjects, videos, health news, health images, drug information and more. Abdelaziz Allabadi and Jalil Allabadi facilitate the connection between doctors and patients, by enabling patients to ask questions of medical professionals, follow topics and individual doctors of interest, and get latest updates. The platform also offers the possibility to speak to a doctor on the telephone, look up medical directory of doctors and medical centers all over the world. Altibbi aims to contribute to raising the awareness of public health and enrich the medical content found online in Arabic. Altibbi also aims to add services to their main value proposition, reducing costs to give a sense of a more rounded approach. These services will be targeting beneficiaries and include health tips and management and a health dashboard.

CHALLENGES

- Understanding how to connect with and best approach collaborations with international insurance companies
- Introducing partnerships with international mobile payment companies that operate in the region
- Enhancing Altibbi’s internal governance and quality of procedures

KEY TAKEAWAYS

- Learnings on how to build efficient partnership engagement and collaboration models
- Key insights on Altibbi’s business model and demographic focus
- Key advice on Altibbi’s payment mechanisms and quality measures for remote health services
- Key insights different tier pricing models for insurance and corporate partners
- Connections and offered by STPs through their networks as well as follow up advice



AMR EL TAYEB
SMART MEDICAL SERVICES
EGYPT

SNAPSHOT

Amr El Tayeb is popularizing access to healthcare systems by gathering and deploying intelligent information and establishing preferred policy in Egypt. His organisation, Smart Medical Services began as a service provider company which doubled its revenues and members every year, becoming the first Egyptian company to have an intelligent, fully integrated online platform for all its B2B services. Smart Medical Services has evolved into embedding technology into all aspects of their business, recently expanding into the area of predictive analytics and artificial intelligence. Smart Medical Services is leveraging their B2B efficacy, technology and enhanced resource utilization to provide options to different segments of society who do not have access to adequate healthcare options. They recently launched a new integrated health services program, Sehaty, focusing on individuals with inadequate access to healthcare, with the objective of creating quality affordable options.

CHALLENGES

- Aggregating more demand for medical services
- Contributing to making quality medical services available and affordable
- Facilitating interactivity between the users and providers of medical services

KEY TAKEAWAYS

- Key learnings on partnership strategy and potential partners to engage
- Insights on communication and branding of Smart services
- Follow up support offered by STPs as ongoing advisors





ANDRES RUBIANO & NANCY ANN CARNEY

MEDITECH FOUNDATION
COLOMBIA

SNAPSHOT

Andres Rubiano Escobar and Nancy Ann Carney are fostering a new consciousness and system for integral trauma care through MEDITECH Foundation, a research and educational organization dedicated to developing improved trauma care systems in Colombia and Latin America. MEDITECH educates at all levels—right from community first responders to advanced medical providers—conducts clinical research and develops protocols of care for centers with varying levels of resources. The goal is to identify and disseminate the most effective treatments for trauma in low resource settings. MEDITECH is creating a new context, moving ahead with health-related (education, research, technology) public and private partners to introduce new cost effective interventions, and developing successful pilot models that demonstrate a pathway to influence health policy in order to change the system.



CHALLENGES

- Understanding how to approach public-private partnerships
- Finding strong and reliable partners to improve the quality of health care in Latin America
- Tapping into new digital business development expertise
- Exploring how MEDITECH Foundation can function as a catalyst in Colombia and beyond

KEY TAKEAWAYS

- Different perspectives and insights on Meditech's process that Andres plans to integrate, especially related to stakeholders interaction and incentives
- Key insights on enabling champions and spreading the model through new stakeholders that can also participate
- Business model analysis and insights on designing public-private partnerships
- Follow up support provided by STPs on international market operations and corporate partnership incentives



ARMIDA FERNANDEZ & VANESSA D'SOUZA

SNEHA
INDIA

SNAPSHOT

Armida Fernandez and Vanessa D'Souza reorient and reorganize the limited resources of India's public health system through the Society for Nutrition, Education and Health Action (SNEHA). SNEHA is a secular, Mumbai-based non-profit organization working to improve the health of women and children in marginalized urban slum communities, working on a life cycle approach covering four main areas of public health: Maternal & Newborn Health, Child Health & Nutrition, Adolescent Health & Sexuality, Prevention of Violence against Women & Children. SNEHA develops evidence-based models in partnership with public health systems and communities to improve maternal and child health with the aim to break the inter-generational cycle of poor health and to give mothers and children opportunities to lead a healthy life. While increasing access, SNEHA seeks to simultaneously change the health seeking behavior of vulnerable communities, while also empowering them through information on health services and their rights, by mobilizing volunteers, forming action groups and building their capacity to address their own health needs.

CHALLENGES

- Building new low cost models of implementation, as well as reducing costs in the current model
- Effective and impactful use of mass media and social media
- Ensuring effective and sustainable HR practices

KEY TAKEAWAYS

- Key learning on their approach to scale that inspired team SNEHA to shift from a replicator role to a catalyst role through creating multi-stakeholder alliances
- Key advice on how to create economic opportunities for women's groups
- Connection offered by an STP to a media organisation to assist with health education material
- Key advice on social media strategy and follow up support offered by STP





ASHER HASAN

NAYA JEEVAN / DOCTHERS
PAKISTAN

SNAPSHOT

With Naya Jeevan, Asher Hasan is providing quality, private health insurance to low-income workers in the emerging economies through an approach that distributes cost and social responsibility among several stakeholders affiliated with low-income beneficiaries. The exclusion of women in the workforce in both developing countries and mature markets has resulted in not only a massive loss of human potential but also loss of human life - especially in emerging countries such as Pakistan, where millions of people continue to lack access to quality, affordable healthcare. It is estimated that there are 50,000 qualified female doctors

excluded from the health workforce in Pakistan and over 300,000 female doctors worldwide who are not participating (transitionally or permanently) in the global workforce. To tackle these market failures, DoctHERs has developed a digital health platform that matches the underutilized capacity of female doctors (who would otherwise be excluded from the global workforce) to the unmet healthcare needs of underserved communities.



CHALLENGES

- Accelerating demand for the services offered by female doctors in underserved communities
- Creating more value and incentives for the female doctors working with DoctHERs

KEY TAKEAWAYS

- Understanding the potential for growth in the application of this working model in other industries and fields
- Key-learnings on building a solid value proposition and monetizing strategies
- Exploring opportunities to scale internationally
- Through the networks of STPs, direct connections to relevant potential partners
- Follow up support offered by STPs as ongoing advisors



CARLOS ATENCIO

FUNDACIÓN VENEZOLANA PARA LA
MEDICINA FAMILIAR
VENEZUELA

SNAPSHOT

Carlos Atencio is responding to the failing healthcare system in Venezuela by introducing a new model of care based on family practice medicine and centered on community participation and responsibility. Fundación Medicina Familiar enables greater accessibility to prevention services for Venezuelan communities, with the goal of becoming the main health system in the country. The FMF model is replicable in both the public and private sector. FMF has envisioned a system where every family doctor could invest and take the time to understand the symptoms, the family history and the relation of the body as a whole from a deeper perspective. FMF seeks to replicate the successful model by developing and launching at new centers in the larger Venezuela cities.



CHALLENGES

- Managing FMF in the extremely volatile and uncertain political situation in Venezuela
- Approaches to access international support programs, regarding both financial and material (equipment, technology, medication) help
- Better understanding of scale up strategies

KEY TAKEAWAYS

- Key advice on how to consider partnerships with local governments as well as large corporates as part of his scaling strategy
- Concrete recommendations and helpful tools to improve performance and growth
- Key practical insights into how to build an IT platform to support his organization and impact
- Follow up support from STPs offered as ongoing advisors
- Valuable network connections and direct referrals by the STPs
- Potential collaboration to launch with Andres Rubiano by the end of the year



DY SUHARYA
ALZHEIMER INDONESIA
INDONESIA

SNAPSHOT

More than 70% of people in Indonesia consider memory loss as a normal part of aging, rather than a symptom of dementia. Alzheimer Indonesia (ALZI) has increased visibility of dementia awareness and influenced the government of Indonesia to launch a Dementia National Plan in 2016. Additionally, the local government of Jakarta declared the city as a dementia and aging friendly city in 2015 through an integrated support system of “purple troops” committed to provide information for families caring for someone with dementia. ALZI has become the go-to-source on all things related to dementia. Going forward, Alzheimer’s Indonesia will take on the challenge of establishing of a platform to connect users to information, solutions, and a network of Care-Navigators. The Care-Navigator’s role will work as part of the broader service system, looking to what other support is needed and available to support people with dementia and their families (i.e. respite care, etc). The milestone: 1 million families will have access to Care-Navigators (via the platform-app) in 34 provinces in Indonesia by 2025.



CHALLENGES

- Designing a comprehensive and sustainable finance model that encompasses both NGO and profit-based operations
- Engaging the team in the scaling efforts, keep them incentivized and motivated
- Ensuring the viability of the organization beyond personal involvement

KEY TAKEAWAYS

- Exploring a variety of sustainable business models and new market entry ideas
- Key learnings through scenario insights on the overall strategy for system change of diagnosis care and treatment of dementia
- Key insights and validation and perspectives into their digital strategy
- Though the networks of the STPs, direct connections to academic health professionals
- Follow up support offered by STPs as ongoing advisors on various issues including strategy, marketing and financial modelling



**EDITH GRYNSPANCHOLC
& JUDITH LEWITAN**
FUNDACIÓN NATALÍ DAFNE FLEXER
ARGENTINA

SNAPSHOT

Edith Grynszpancholc and Judith Lewitan focus their efforts on solving patients’ problems in access to treatment through Fundación Natalí Dafne Flexer. FNDF has developed a dedicated software to maintain detailed records of the difficulties in access to treatment, while making available the appropriate information and resources for different needs. These activities focus on helping each family overcome ever changing barriers: many families face the same problems and have to overcome different barriers in order to fulfill the requirements and



paperwork to access different resources and services. Their strategy focuses on changing the beneficiaries system by enforcing the existing laws that support the Right to Information for Health System users. Other approaches include: defining the appropriate contents that payers have to provide, extend the use of virtual paperwork, enhance the power of the Regulatory Bodies, empower users to share useful information, and establish mechanism for having record and claiming of unaccomplished obligations.

CHALLENGES

- Exploring potential for implementation of the Fundación Natalí Dafne Flexer approach in other contexts
- Finding the right partners and collaborators
- Advocating for change with other NGOs

KEY TAKEAWAYS

- Key advice on building a business model that helps monetize the operations
- Key insights into how to license or share their model with partners as a means to spread their impact
- Key insights into how to deepen their impact through different services for cancer patients
- Exploring new and effective advocacy strategies
- Follow up support offered by STPs, through direct connections to relevant international partners and research institutions



HILMI QURAISHI & AYUSHI SINGH

ZMQ SOFTWARE SYSTEMS
INDIA

SNAPSHOT

Hilmi Quraishi is using mobile telephony to bring public health messages to the masses. He envisages the widest and deepest reach through the mobile phone, the computer, and the internet, to combat various health and other critical social problems by delivering useful knowledge products in the form of games. ZMQ is a global 'Technology for Development' social enterprise which identifies critical social problems of unreached communities, develops practical technology solutions, and implements them at the last-mile as a sustainable system- change model by provisioning timely information and connecting communities with life-saving products & services. One of ZMQ's key innovations is MIRA Channel - an integrated mobile channel on maternal and child providing health communication, progress tracking and connecting rural women with public health services thus strengthening last-mile health system. MIRA has scaled in India, Uganda, and Afghanistan; and is now scaling to Senegal and Sierra Leone.



CHALLENGES

- Securing sufficient funds for 6 MIRA programs in India, and internationally
- Creating a sustainable business model for service networks, product development, as well as progressive innovation and research

KEY TAKEAWAYS

- New ideas and insights for shifting growth strategy to encompass system-change
- Insights into new strategies and revenue models
- Key advice on the business model behind one of their digital platforms
- Connections through the networks of STPs, including connections with large NGOs and Foundations
- Follow up support offered by STPs as ongoing advisors and collaborators
- Opportunity to explore a commercial partnership with Philips



JAVIER LOZANO, MIGUEL GARZA & RICARDO IODONO

CLÍNICAS DEL AZUCAR
MEXICO, VENEZUELA

SNAPSHOT

Javier Lozano has created a low-cost, one-stop-shop clinic to treat diabetes and prevent the complications associated with the disease. With advanced technology and diagnostic and treatment innovations, his clinic offers high-class yet extremely affordable medical care for populations that could otherwise not access it. Clínicas del Azucar (CDA) is an innovative "behavioral science based" one-stop-shop to treat diabetes and prevent diabetes related complications. It is the largest private provider of diabetes care in the country, operates 13 clinics treating more than 60,000 patients. The scaling goal is to reach 200 clinics and 1 million patients in 5 years, while also enriching the model to capture data from patients in order to create archetypes and personalize diabetes treatments.

CHALLENGES

- Manage growth in relation to profitability
- Understand the best way to integrate a digital strategy into CDA's current clinic model
- Explore the main focus and concerns for expansion in Mexico and internationally



KEY TAKEAWAYS

- Key learning on the need for partnerships in order to scale fast and efficiently
- Key insights into how to integrate a subscription model into their pricing scheme as well as adapting the franchise model to access higher-income customer base
- Exploring collaboration opportunities through the network of Philips and Philips Foundation
- Key advice on how to monetize CDA's extensive data-set
- Key insights on opportunities to scale impact through digital solutions as well as advice on data software insights along Customer Journey.
- Follow up support through connections offered through the networks of STPs



OLIVER BOGLER

ECHO

UNITED STATES OF AMERICA

SNAPSHOT

Every year, millions of people around the world suffer and die from conditions and diseases we know how to prevent, manage, and cure. Knowledge of effective interventions is growing, yet the ability to apply it broadly has not kept pace. Project ECHO is changing the way knowledge flows, using a collaborative education model, using guided practice, powered by technology and designed for measurement, that empowers health care providers to give better care to more people at the right place at the right time, often right where they live. Project ECHO dramatically increases capacity and access to best practice treatment in rural and underserved areas. Today, ECHO is being used by 200 centers in 29 countries to address over 65 diseases and conditions. Dozens of peer-reviewed studies have demonstrated the model's strong positive impact on patients, providers, and entire populations and health systems. The ECHO Institute serves at the center of the ECHO community providing training and technical assistance to partners, replicating the model.

CHALLENGES

- Managing a large, community-based, digital project with a significant remote team
- Approaching institutional change from an 'academic department' to an institute
- Establishing and managing international branch offices



KEY TAKEAWAYS

- Key insights into how Project ECHO fits into the system of healthcare and relates to other innovations
- Key advice into adapting the donation / charity model to find revenue models that can help Project ECHO meet the demands of scaling impact to 1bln people
- Follow up support through connections from the networks of Ashoka Fellows and STPs, including potential organisations to learn from



PRASANTA TRIPATHY & SHIBANAND RATH

EKJUT

INDIA

SNAPSHOT

Dr. Prasanta Tripathy is the cofounder of Ekjut (togetherness, in multiple Indian languages), a non-profit organization in India. Through a series of collaborative community based research trials, Ekjut and University College London established that Participatory Learning and Action (PLA) monthly meeting cycles facilitated by a trained woman from the rural underserved village and hamlet of districts of Jharkhand and Odisha states of India, can bring about reduction of newborn and maternal deaths. Replicability and sustainability of impact was also established. PLA is an agile intervention leading to context specific solutions for savings lives. Dr. Prasanta and colleagues disseminated their findings widely, which resulted in the Government of India approving scale- up in 10 states of India through government frontline health workers called ASHAs in 2015. Grants from foundations and governments are being strategically used for supporting governments in this scale up in more than forty thousand villages right now.



CHALLENGES

- Ensuring the continuation of government support
- Building an alternative and sustainable funding strategy
- Showing the need for this solution
- Donor retainment strategies
- Productively engaging and collaborating with other NGOs

KEY TAKEAWAYS

- Insights on effective communication strategies for community building and engagement. Follow up support also offered.
- Key learnings on retaining government support and on how to approach partnerships with NGOs
- Exploring strategies for stakeholder and donor engagement including building internal champions in the organisations
- Follow up support offered through the networks of STPs, direct introductions to large multinational organisations
- Follow up support offered by STPs as ongoing advisors



RITA MELIFONWU & OGO OKOYE

STROKE ACTION NIGERIA
NIGERIA, UK

SNAPSHOT

Through Stroke Action Nigeria, Rita Melifonwu and Tim Okolonji provide practical advice and support that enable stroke survivors and their caregivers to cope with life after a stroke. Stroke prevention and self-management services are also offered to stroke survivors and at risk individuals such as people living with hypertension and diabetes. Currently, 200 000 Nigerians suffer a stroke each year. There is a dearth of stroke units in Nigeria and most of the stroke survivors are adults in their economically active life span who are disabled, unemployed and live in poverty as a result of having a stroke. Stroke Action Nigeria equips and empowers these stroke survivors as Stroke Entrepreneurs who are able to improve their own wellbeing, advocate for policy change, and are incentivized to improve their livelihood through operating a Social Franchise outlet as an accessible, affordable and equitable Stroke Support Service Shop. The Stroke Entrepreneur franchisers, in collaboration with other health workers, will offer services that enable other stroke survivors to be healthy, regain function, and become re-integrated into their communities.

CHALLENGES

- Ensuring financial sustainability and exploring hybrid business models
- Understanding how to affect policy change
- Insights into efficient HR and staffing practices
- Transforming from non-profit to for-profit
- Securing investments for infrastructure development

KEY TAKEAWAYS

- Challenged into reviewing scaling strategy to include the Prevention Agenda which Stroke Action Nigeria already provides
- Insights on the communication strategy of Stroke Action Nigeria
- Direct contacts to national and international funders and foundations via the networks of the STPs
- Learnings on sustainable social franchising and hybrid business models
- Understanding potential for growth by expanding and broadening the scope of direct care to wellbeing
- Follow up support offered by STPs, as ongoing advisors and through personal and professional mentorship
- Potential co-creation opportunities and funding within the Philips Network



SHONA MCDONALD & SARAH DRIVER JOWITT

SHONAQUIP
SOUTH AFRICA

SNAPSHOT

Uhambo-Shonaquip works in low resourced countries where children with mobility disabilities cannot access services or appropriate resources for mobility, posture support and inclusion. Shonaquip designs solutions which bridge barriers created by inaccessible transport and centralised rehabilitation services. The organization upskills and builds capacity of key personnel to provide competent services where skills are scarce, scaling through partnerships with public, private corporations and NGO to build locally sustainable capacity for quality service provision in low resource communities, enabling children with mobility disabilities and their families to live inclusive lives. Shonaquip will build an inclusive ecosystem to optimally support children with mobility disability and their families in the Northern Cape as a pilot through a tripartite alliance between Shonaquip and Uhambo, the government and a corporate funder driving adequate levels of funding to appropriate places in the ecosystem in order to measure the impact of a holistic support model.



CHALLENGES

- Scaling beyond a provincial project
- Accessing the right countries and building a global movement
- Finding the right partners to accelerate progress
- Improving on social impact delivery

KEY TAKEAWAYS

- Key advice on investment strategy and approaches to blended finance
- Key insights into refining their narrative on the strategy for their pilot and its impact in their system change journey
- Key insights into how to position devices and focus on their buying points
- Collaboration opportunity to explore with STP
- Follow up support offered through connections of STPs, including introductions to Banks in South Africa & other relevant players in Africa and Asia

ACCELERATOR DAY

FELLOW REFLECTIONS

“ Though my work is about empowering communities, I for the first time experienced what it is to be in the receiving end of such a process. It was uplifting! Globaliser process was all about respect and empathy. For the first time in my life there were front row chairs“ Reserved” for us ! Wow!”
Prasanta Tripathy

“Don’t reinvent the wheel, find someone who has also done it and let them help you!”
Carlos Atencio

“Typically at these events, we do something I call strategic snorkeling. What we did here, was strategic deep sea diving!”
Asher Hasan

“ In every meeting we found questions and answers; and we even found answers to questions we didn’t know we had! “
Edith Grynszpanchalc

“Normally, people come to me for advice, but now I was able to ask questions and learn from others. It has helped me focus on what to do next.”
Rita Melifonwu

“ The collaboration with the other fellows and STPs, has helped me better understand the system I am working in.”
Amr El Tayeb

“I have decided to focus more on system change as a core part of my impact strategy.”
Oliver Bogler

“Fantastic! I have been part of 3 Globalizers - 2010 (Vienna), 2012 (Munich) and 2018 (Eindhoven). This was by far the best one for me. Lot of new ideas and linkages and actionable item for my organization”
Hilmi Quraishi

ACCELERATOR DAY

IMPACT

- 14 Ashoka Fellows involved, creating impact in 37 countries
- 23 Strategy Thought Partners at the AHA! Accelerator Day
- 100 percent of Strategic Thought Partners would join the Globalizer Summit again
- 9.6 Net Promoter Score on the Accelerator Day
- 3.4 Average STP Rating by Fellows (3.4 out of 4)

KEY TAKEAWAYS

- 92 percent of Fellows left with new ideas for their Strategy
- 92 percent of Fellows left with new connections
- 62 percent of Fellows left with potential partnership opportunities with STPs





STAY CONNECTED!

By joining forces, we can accelerate progress. We invite you to stay connected with us, to achieve the systemic change in healthcare systems enabling universal access to healthcare.



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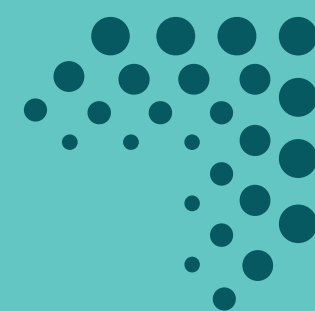
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