

# HEALTH INNOVATION CHALLENGE

How can we create market based solutions to supplement, augment, and complement the efforts of public resources in combatting some of the world's forthcoming health challenges?

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## BACKGROUND

The United Nations Sustainable Development Goal (SDG) number three specifies that we need to:

***“Ensure healthy lives and promote well-being for all at all ages”***

With the completion of the Millennium Development Goals era, much progress has been made regarding primary global health concerns. There has been a concerted effort to diminish the foundation and effects of Infectious diseases, maternal and perinatal conditions, and malnutrition. In 2016 and for the next decade to come, new threats to human health are emerging in developing countries.

# CHALLENGE

How can we create market based solutions to supplement, augment, and complement the efforts of public resources in combatting some of the world's forthcoming health challenges?

World Vision Canada has identified 5 key challenges that will have a significant effect on the level of health of the global population with a focus on the world most poorest and disadvantaged communities. Ideas submitted to the open platform should address one of these key issues:

1. **Non-Communicable Diseases:** Infectious diseases and malnutrition used to be the world's biggest killers. Now non-communicable diseases, which include heart disease, stroke, cancer, diabetes and chronic lung disease, represent the major killers in most countries. The health targets of the SDGs embrace bold new goals for turning the tide on non-communicable diseases. Developed and developing countries alike are struggling to cope with the high cost of these diseases, in terms of lost lives, lost productivity, infrastructure financing, and the human capital required to treat them.<sup>1</sup>
2. **Mental Health:** Mental health is defined as a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community. There is ample international evidence that mental disorders are disproportionately present among the poor, either as a result of a drift by those with mental health problems towards more socially disadvantaged circumstances) or because of greater exposure to adverse life events among the poor.<sup>2</sup> Further, many low- and middle-income countries currently allocate less than 2% – or even 1% – of the health budget to the treatment and prevention of mental disorders. This is not remotely proportionate to the burden they cause, and appears to place a very low value on the psychological or emotional wellbeing of populations. The plight of individuals suffering from mental health problems is all too often met with indifference or outright prejudice by the communities and societies they live in. The situation is particularly bleak in low-income countries. Even among those with very serious mental disorders such as schizophrenia, only one in 10 persons in low-income countries receives the treatment and care they need.<sup>3</sup>
3. **Personal Health Funding Challenges:** Many people in developing countries lack universal health coverage. If a health crisis strikes, they are often at risk of financial ruin or impoverishment due to high medical bills.<sup>4</sup> An estimated 150 million people suffer financial catastrophe each year due to a health crisis that forces them to pay out of pocket for the care they need.<sup>5</sup> Since many developing nations do not have sufficient funds to provide universal health coverage, this is an urgent problem.<sup>6</sup>

- 4. Health Care System Challenges; Accessibility of Healthcare Services in Rural Settings:** Due to the remote nature of rural settings, health professionals struggle to provide adequate diagnostic services, primary healthcare, and surgical services to patients.<sup>7</sup> Health professionals in rural settings struggle to diagnose illnesses / diseases due to a lack of diagnostic equipment. Efficiently and effectively diagnosing communicable diseases, heavy metal poisoning, non-communicable diseases, and obstetric problems is hard if not impossible.<sup>8</sup>

Lack of Surgical Care: The availability, accessibility and affordability of surgical care in rural areas are a major problem. It is expensive to set up surgical facilities in remote areas, and if available, it is even more difficult to get surgeons and others to staff them. If facilities and staff are available, the workload and paying capacity might not be sufficient to sustain the facility in a rural area.<sup>9</sup> At this point in time, 5 billion people lack access to surgical care in the developing world but with scaled up access to surgical care, 1.5 million lives could be saved every year in low and middle income countries.<sup>10</sup> 288.2 million people in the poorest 48 countries are in need of surgical care, but are unable to access it.<sup>11</sup>

Counterfeit medicines: Counterfeiting is especially prevalent in developing countries, estimated at 10-30%, where there are few or no rules about making drugs.<sup>12</sup> The consequences of counterfeit drugs include patient harm or death, engendering of drug resistance and loss of medicine efficacy, loss of confidence in health systems and health workers, economic loss for patients and their families, and increased burden for health workers, customs officials, and police officers.<sup>13</sup>

- 5. Pandemic Diseases:** Another rising health concern is global pandemics. The pandemics of the past decade have clearly demonstrated the speed at which infections spread across the globe. Ebola, SARS, MERS, and H1N1—to name but a few—demand coordinated and agile healthcare responses. Pandemics will in all likelihood exert periodic and significant disruptive pressure on health systems. Healthcare organisations across the globe need to be ready to work together to contain outbreaks quickly when they occur.

1 (Sterlin, 2015: 1)

2 (WHO, 2013b:12)

3 (WHO, 2013b: 15)

4 (WHO, 2013a: 4)

5 (WHO, 2013a: xii).

6 (WHO,2013a: 7)

7 (Gnanaraj, 2014; Huaynate, et al., 2015).

8 (Huaynate, et al., 2015)

9 (Gnanaraj, 2014)

10 (Hausman, 2016; WHO, 2016b).

11 (WHO, 2016b).

12 (CDC, 2014).

13 (Newton, Green, and Fernandez, 2010).

# CRITERIA

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### 1. Focus on the Poor:

World Vision Canada seeks to address some of the most significant challenges addressing the world's poorest communities. Ideas need to be focuses on implementation in South America, Africa and South and East Asia.

### 2. Market Based Approaches:

Traditional approaches in the development sector focus on extreme poverty and address immediate needs to reduce vulnerability to future shocks. Market-based approaches on the other hand are based on the premise that being poor does not eliminate trade and market processes. Market-led approaches therefore look at people as consumers, producers, entrepreneurs and seek solutions that make markets more efficient, competitive and inclusive.

### 3. Cost Effectiveness:

With so many people to reach, the ability to pay for services and an expectation for sustainability, cost effectiveness is important.

### 4. Sustainable Change:

Water and sanitation are needed every day and solutions need regular maintenance and investment. We're excited about solutions that prioritize the sustainability needed to make lasting change.

### 5. Consider Scale:

Despite population growth slowing in recent years, the global population is projected to reach 8 billion in 2025 and about 11 billion by the year 2110<sup>1</sup>. Consequently, solutions that are able to reach scale will be the most impactful.

[1] Roser, 2016

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