APRIL 2020

Integrated Thyroid NCD Care in the Philippines

Merck KGaA, Darmstadt, Germany

Submitted as part of Access Accelerated

Access Observatory

Contents

Program Description

Program Overview

1 Program Name

Integrated Thyroid NCD Care in the Phillippines

2 Diseases program aims to address

• NCD (Thyroid)

3 Beneficiary population

• Women
• General population

4 Countries

• Philippines

5 Program start date

January 9, 2016

6 Anticipated program completion date

Completion date not specified.

7 Contact person

Yasmine Rouai (Yasmine.rouai@emdserono.com)

8 Program summary

On September 16 2015, Merck Serono officially announced the launch of a partnership in the Philippines to improve thyroid disorders' care in the Philippines.[1] The objective of the partnership between the Philippines Department of Health, the Philippines Thyroid Association and Merck Serono, is to implement jointly agreed activities to advance the diagnosis and treatment of the Filipino population suffering from thyroid disorders.[1] Specifically, the partnership aims to:- raise awareness about thyroid symptoms among the population and health care providers through online, radio, and print information campaigns. - improve the capacity of primary care physicians to diagnose and manage thyroid disorders which is provided by Philippines Thyroid Association.

Program Strategies & Activities

9 Strategies and activities

Strategy 1: Community Awareness and Linkage to Care

ACTIVITY	DESCRIPTION
Communication	Online, radio, and print information campaign.

Strategy 2: Health Service Strengthening

ACTIVITY	DESCRIPTION
Training	Provide training for primary care physicians to diagnose and manage thyroid disorders.

10 Strategy by country

STRATEGY	COUNTRY
Community Awareness and Linkage to Care	Philippines
Health Service Strengthening	Philippines

Companies, Partners & Stakeholders

11 Company roles

COMPANY	ROLE
Merck & Co., Inc.	Facilitate coordination between partners; Funding for awareness activities and for training for physicians; Develop and present the awareness campaign materials

12 Funding and implementing partners

PARTNER	ROLE/URL	SECTOR
Philippines Thyroid Association	Provide epidemiologic and clinical information and recommendations on thyroid disorders; Capacity building of physicians; Conduct lay and outreach programs https://www.philippinemedicalassociation.org/philippine-thyroid-association/	Voluntary
The Philippines Department of Health	Develop and implement national thyroid health policies and programs; Facilitate the improvement of standards of care Provide regulatory oversight on awareness materials http://www.doh.gov.ph/	Public

Companies, Partners & Stakeholders

13 Funding and implementing partners by country

PARTNER	COUNTRY
Philippines Thyroid Association	Philippines
The Philippines Department of Health	Philippines

14 Stakeholders

STAKEHOLDER	DESCRIPTION OF ENGAGEMENT
Government	The Republic of the Philippines Department of Health develop and implement national thyroid health policies and programs; facilitate the improvement of standards of care provide regulatory oversight on awareness materials.
Non-govern-mental organi-zation (NGO)	The Philippine Thyroid Association provide epidemiologic and clinical information and recommendations on thyroid disorders; capacity building of physicians; conduct lay and outreach programs.

Local Context, Equity & Sustainability

15 Local health needs addressed by program

In the Philippines, the national prevalence of thyroid dysfunction among adults was 8.53% in 2012.[2] In this study by The Philippine Society of Endocrinology and Metabolism, using laboratory documentation of thyroid function tests, the subclinical presentations of hypo or hyperthyroidism were the most common forms (5.33% and 2.18% respectively). The full disorders were present in 0.6% and 0.4% of the population respectively.[2] The impact of lost homeostasis in thyroid function which regulates numerous metabolic processes in the body, can have severe health and quality of life impacts if left untreated, spanning from loss of productivity to overt disability.[2] Moreover, the burden of disease and mortality risk are augmented as comorbidities arise (cardiovascular disease, mental alterations, physical function).[2,3] In addition, the potential consequences are worse for vulnerable populations, like the elderly, pregnant women, cardiovascular patients, and others.[2,3] Despite the public health case for thyroid disorders, the Republic of the Philippines Department of Health, does not have a formal program.[5] As reflected in national health reports, it is unrecognized even for vulnerable populations like pregnant women unlike other areas such as TB, malaria and HIV/AIDS.[4] More awareness, research and surveillance is therefore required for proactive planning and strategic intervention, with a focus on vulnerable populations.[3]

a How needs were assessed

[No response provided]

b Formal needs assessment conducted

[No response provided]

16 Social inequity addressed

This programs aims to increase awareness, amongst health care providers' and the general population, of thyroid disorders and the capacity of primary care physicians to diagnose and manage thyroid disorders. This program will help reduce the global inequity is thyroid disorder diagnosis and management between Philippine and high income countries.

17 Local policies, practices, and laws considered during program design

Currently, there are no health programs focused on thyroid care listed under the Republic of the Philippines Department of Health.[5] Likewise, there are no policies on thyroid care. To ensure that the capacity building activities for physicians to diagnose and manage thyroid disorders are consistent with local practices and laws, we engaged the Philippines Thyroid Association to provide physician training.

18 How diversion of resources from other public health priorities are avoided

[No response provided]

Local Context, Equity & Sustainability

19 Program provides health technologies (medical devices, medicines, and vaccines)

No.

20 Health technologies are part of local standard treatment guidelines

N/A.

21 Health technologies are covered by local health insurance schemes

N/A.

22 Program provides medicines listed on the National Essential Medicines List

N/A.

23 Sustainability plan

[No response provided]

Additional Program Information

24 Additional program information

[No response provided]

a Potential conflict of interest discussed with government entity

[No response provided]

25 Access Accelerated Initiative participant

Yes.

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

Yes.

Resources

1.   PR Newswire Cision. Merck launches partnership with Department of Health, Philippines and Philippine Thyroid Association. http://www.prnewswire.co.uk/news-releases/merck-launches-partnership-with-department-of-health-and-philippine-thyroid-association-527832421.html

2.   Carlos-Raboca et al. The Philippine Thyroid Diseases Study (PhilTiDeS 1): Prevalence of Thyroid Disorders Among Adults in the Philippines. The Philippine Society of Endocrinology and Metabolism (PSEM) PhilTiDeS Working Group. Asean Federation of Endocrine Societies. 2012; 27(1). http://asean-endocrinejournal.org/index.php/JAFES/article/view/9/400

3.   PR Newswire Cision. Merck launches partnership with Department of Health, Philippines and Philippine Thyroid Association. http://www.prnewswire.co.uk/news-releases/merck-launches-partnership-with-department-of-health-and-philippine-thyroid-association-527832421.html

4.   DHS 2013 Philippines. https://dhsprogram.com/pubs/pdf/FR294/FR294.pdf

5.   Philippines DOH website, http://www.doh.gov.ph/health-programs

Program Indicators

PROGRAM NAME

Integrated Thyroid NCD Care in the Phillippines

27 List of indicator data to be reported into Access Observatory database

	INDICATOR	TYPE	STRATEGY	2017	2018	2019
1	Tools in use	Output	Community Awareness and Linkage to Care	4 tools	---	---
2	Number of people trained	Output	Health Service Strengthening	2,480 people	---	---
3	Population exposed to media communication activities	Output	Community Awareness and Linkage to Care	115,869 people	---	---

INDICATOR **Tools in use**

STRATEGY   COMMUNITY AWARENESS AND LINKAGE TO CARE

	ITEM	DESCRIPTION
	Definition	Number of tools (e.g., mHealth, EMR, etc.) introduced and in use by the program
	Method of measurement	Counting the number of tools created and in use by the program CALCULATION Sum of number of tools created by the program
28	Data source	Routine program data
29	Frequency of reporting	Once per year

		RESPONSIBLE PARTY	DESCRIPTION	FREQUENCY
30	Data collection	Company	The local team member works with the trainers to create communication tools including a website, flyers, and Facebook page. The number and type of tools created by the program are recorded.	Once per year
31	Data processing	Company	Once a year, we sum the number of tools created by our program based on our records.	Once per year
32	Data validation		We post the tools in use and a member of our team verifies that the number of tools reported tallies with the tools posted online.	

33   Challenges in data collection and steps to address challenges

[No response provided]

INDICATOR	2017	2018	2019
1 Tools in use	4 tools	---	---

Comments: There is a facebook page, a website, and TV and radio spots.

Number of people trained

	ITEM	DESCRIPTION
	Definition	Number of trainees
	Method of measurement	Counting of people who completed all training requirements CALCULATION Sum of the number of people trained
28	Data source	Routine program data
29	Frequency of reporting	Once per year

		RESPONSIBLE PARTY	DESCRIPTION	FREQUENCY
30	Data collection	Company	A member of the local team attends the training and follows up with the trainees. The trainees sign an attendance register at the time of training.	Ongoing
31	Data processing	Company	Once a year, we sum the number of people trained during the year based on our records.	Once per year
32	Data validation		None.	

33 Challenges in data collection and steps to address challenges

[No response provided]

INDICATOR		2017	2018	2019
2	Number of people trained	2,480 people	---	---

Comments: N/A

Population exposed to media communication activities

STRATEGY   COMMUNITY AWARENESS AND LINKAGE TO CARE

ITEM		DESCRIPTION
	Definition	Number of population reached through media awareness campaign.
	Method of measurement	Counting of participants reached by media message disseminated. CALCULATION Number of people in the target audience reached by disseminated media message in a given period of time.
28	Data source	Routine program data.
29	Frequency of reporting	Once per year.

		RESPONSIBLE PARTY	DESCRIPTION	FREQUENCY
30	Data collection	Company	Once a year, we check the views of our Facebook page and website. To calculate the number of views for the year, we subtract the number of views at the beginning of the year from the number at the end of the year.	Once per year
31	Data processing	Company	None.	Once per year
32	Data validation		---	

33 Challenges in data collection and steps to address challenges

[No response provided.]

INDICATOR	2017	2018	2019
3 Population exposed to media communciation activities	115,869 people	---	---

Comments: The total views from the website (105,578) and Facebook page (10,291) should be 115,869. Results as of 31.03.2018: (I) Website utilization data www.thyroid.ph - From April 1, 2017 to March 31, 2018, thyroid.ph has had 105,578 of total visits. The highest number of visits was 51,186 in June 2017.- - (II) Unmasking Your Thyroid (www.facebook.com/thyroidph) Facebook utilization -On April 1, 2017, Unmasking your Thyroid has 14,580 page likes. By the end of March 2018, the page already has a total of 24,879 page likes. - On April 1, 2017, Unmasking your Thyroid has 14,580 page likes. By the end of March 2018, the page already has a total of 24,879 page likes. - Unmasking Your Thyroid's highest organic post reach was recorded on June 20, 2017, which was 18,240. The average organic post reach for the page is 1,482. - Unmasking your Thyroid's highest paid post reach was recorded on June 12, 2017 with a total of 154,814 post reach and an average of 19,699. - Unmasking your Thyroid gets an average of 229 reactions (like, love, sad, wow, angry, haha), an average of 15 comments, and an average of 32 shares. (III) Media appearances on TV, radio, and print are planned as part of International Thyroid Awareness Week (ITAW) celebrations and Goiter Awareness Week. The following are the tv and radio guesting from April 2017 to March 2018: 1. DWIZ_Kalusugan Kakabilib (ITAW 2017) 2. DZBB Ladies Room (ITAW 2017) 3. TV 5 (ITAW 2017).

Comments cont.: 4. DZMM_TeleRadyo Magandang Gabi Dok (ITAW 2017) 5. DZBB_Easy Easy Lang (ITAW 2017) 6. Bagong Pilipino (ITAW 2017) 7. CNN Newsroom (ITAW 2017) 8. Radyo Natin (ITAW 2017) 9. DZIZ Kalusugan Kakabilib (GAW 2018) (IV) No further print media campaign. (V) Development of National Policy on Thyroid Disorders Experts Technical Working Group convened, with members from different specialty societies, with Merck as only member from Industry. - The draft national policy was presented to the Management Committee of the originating Bureau of the Department go Health Philippines, Disease Prevention and Control Bureau by the National Program Manger, Dr. Clarito Cairo last January 2018. The draft policy was not approved by the Management Committee because they recommend to include a more comprehensive strategy on prevention. The draft policy was revised by including a program framework that involves prevention, treatment and rehabilitation and health systems strengthening. The revised draft will be presented again to the Management Committee this April 2017.

Appendix

This program report is based on the information gathered from the Access Observatory questionnaire below.

Program Description

PROGRAM OVERVIEW

1 Program Name

2 Diseases program aims to address:

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

3 Beneficiary population

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

4 Countries

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

5 Program Start Date

6 Anticipated Program Completion Date

7 Contact person

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

8 Program summary

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

PROGRAM STRATEGIES & ACTIVITIES

9 Strategies and activities

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

10 Strategy by country

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

COMPANIES, PARTNERS AND STAKEHOLDERS

11 Company roles

Please identify all pharmaceutical companies, including yours, who are collaborating on this program:

What role does each company play in the implementation of your program?

12 Funding and implementing partners

Please identify all funding and implementing partners who are supporting the implementation of this program (Implementing partners is defined as either an associate government or non-government entity or agency that supplements the works of a larger organization or agency by helping to carry out institutional arrangements in line with the larger organization's goals and objectives.)

a. What role does each partner play in the implementation of your program? Please give background on the organization and describe the nature of the relationship between the organization and your company. Describe the local team's responsibilities for the program, with reference to the program strategies and activities. (response required for each partner selected).

b. For each partner, please categorize them as either a Public Sector, Private Sector, or Voluntary Sector partner. (Public Sector is defined as government; Private Sector is defined

as A business unit established, owned, and operated by private individuals for profit, instead of by or for any government or its agencies. Generation and return of profit to its owners or shareholders is emphasized; Voluntary Sector is defined as Organizations whose purpose is to benefit and enrich society, often without profit as a motive and with little or no government intervention. Unlike the private sector where the generation and return of profit to its owners is emphasized, money raised or earned by an organization in the voluntary sector is usually invested back into the community or the organization itself (ex. Charities, foundations, advocacy groups etc.))

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

13 Funding and implementing partners by country

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

14 Stakeholders

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

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

LOCAL CONTEXT, EQUITY & SUSTAINABILITY

15 Local health needs addressed by program

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

a How were needs assessed

b Was a formal need assessment conducted

(Yes/No) If yes, please upload file or provide URL.

16 Social inequity addressed

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

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

17 Local policies, practices, and laws considered during program design

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

18 How diversion of resources from other public health priorities are avoided

Please explain how the program avoids diverting resources away from other public health priorities? (e.g. local human resources involved in program implementation diverted from other programs or activities).

19 Program provides health technologies

Does your program include health technologies (health technologies include medical devices, medicines, and vaccines developed to solve a health problem and improve quality of lives)? (Yes/No)

20 Health technology(ies) are part of local standard treatment guidelines

Are the health technology(ies) which are part of your program part of local standard treatment guidelines? (Yes/No) If not, what was the local need for these technologies?

21 Health technologies are covered by local health insurance schemes

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

22 Program provides medicines listed on the National Essential Medicines List

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

23 Sustainability plan

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

ADDITIONAL PROGRAM INFORMATION

24 Additional program information

Is there any additional information that you would like to add about your program that has not been collected in other sections of the form?

a Potential conflict of interest discussed with government entity

Have you discussed with governmental entity potential conflicts of interest between the social aims of your program and your business activities? (Yes/No) If yes, please provide more details and the name of the government entity.

25 Access Accelerated Initiative participant

Is this program part of the Access Accelerated Initiative? (Yes/No)

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

Is your company a member of the International Federation of Pharmaceutical Manufacturers & Associations (IFPMA)? (Yes/No)

Program Indicators

INDICATOR DESCRIPTION

27 List of indicator data to be reported into Access Observatory database

For this program, activities, please select all inputs and impacts for which you plan to collect and report data into this database.

28 Data source

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

29 Frequency of reporting

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

30 Data collection

a. Responsible party: For this indicator, please indicate the party/parties responsible for data collection.

b. Data collection — Description: Please briefly describe the data source and collection procedure in detail.

c. Data collection — Frequency: For this indicator, please indicate the frequency of data collection.

31 Data processing

a. Responsible party: Please indicate all parties that conduct any processing of this data.

b. Data processing— Description: Please briefly describe all processing procedures the data go through. Be explicit in describing the procedures, who enacts them, and the frequency of processing.

c. Data processing — Frequency: What is the frequency with which this data is processed?

32 Data validation

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

33 Challenges in data collection and steps to address challenges

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