Our focus areas:
Access to Healthcare at Boehringer Ingelheim

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Overview
OUR APPROACH TO ACCESS TO HEALTHCARE

Through various programmes and activities alongside the continuum of care, Boehringer Ingelheim contributes to provide healthcare solutions to patients in resource-constraint settings and to strengthening healthcare systems in low and middle-income countries. Our activities are ranging from adequate awareness building and prevention of diseases, training and education of healthcare personnel, technology transfer and local capacity building up to post-treatment patient services.
Dear reader,

“He used his power to try to make life better for people and he also tried to change the way people thought and lived.” Thus can be described the ethical code of Ashoka, an emperor who ruled India in the third century BC. In the same spirit, Boehringer Ingelheim is engaged in emerging economies in various fields of healthcare development.

Awareness and prevention are important elements of any health system. By being successful in this endeavor, governments and the private sector can save lives, as well as financial resources. Also, the cooperation with non-governmental and faith-based organisations is crucial.

Capacity building is another strategic pillar, since education and training are mandatory for development in health anywhere in the world. Boehringer Ingelheim has implemented various mechanisms making access to life-saving drugs possible for people who live under poor conditions.

Finally let me point out the need for social innovation. Our initiative “Making more Health” was launched five years ago at the 125th anniversary of our company. We made it our mission to support social entrepreneurs in the wider field of health who implement innovative business solutions to bring health to the people, create income and value within the countries where the initiative is executed.

I sincerely hope that I was able to raise your interest, and I would like to invite you to enter into dialogue with us on discussing healthcare issues in emerging economies.

Yours sincerely,

Christian Boehringer
Chairman of the Shareholders’ Committee
Dear reader,

it gives me great pleasure to herewith present “For better Health”, a brochure focusing on Boehringer Ingelheim’s contribution to improve health globally. Over the next pages I would like you to embark upon a journey through the various health initiatives Boehringer Ingelheim is supporting all around the globe.

As a family-owned company, we have always made research and development of innovative medicines our core task. Research and development contributes to promoting health in high-income as well as low-income countries - as the example of HIV has shown. However, our customers and the public at large can expect the mandate of a responsible company like ours not to be limited to this, but to bring forward solutions to healthcare developmental issues – especially in populations with limited access to healthcare. We are convinced that activities such as those highlighted in this brochure make a contribution to offering extended service as well as an improved value chain. They are a result of our commitment to contribute to a better society, ensuring the health of populations around the world. And, of course, all these elements need constant monitoring and evaluation in order to improve our services.

I wish you a pleasant reading and look forward to entering into the debate on better healthcare.

Yours sincerely,

Andreas Barner
Chairman of the Board of Managing Directors
Our focus areas: Access to Healthcare at Boehringer Ingelheim

To improve healthcare for communities around the world, Boehringer Ingelheim is committing itself within four focus areas that build on and influence each other. Through awareness and prevention, capacity building, access and tiered pricing systems as well as social innovation, Boehringer Ingelheim aims to trigger lasting changes. For Better Health.

**AWARENESS AND PREVENTION**

Prevention of diseases is the most effective form of healthcare. This is why Boehringer Ingelheim commits itself to awareness campaigns all around the world. For a healthier society.

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CAPACITY BUILDING
Boehringer Ingelheim has made it its mission to build capacity by transferring technology and know-how, improving the standard of healthcare in resource-constraint countries. For reliable healthcare.

ACCESS AND TIERED PRICING SYSTEMS
To support populations in low and middle income countries, Boehringer Ingelheim brings medication to patients in need through sophisticated Access Programmes and Tiered Pricing Systems. For comprehensive healthcare.

SOCIAL INNOVATION
With “Making More Health”, Boehringer Ingelheim and Ashoka improve health in communities around the world by bringing together business and social knowledge. For a prosperous society.
Disease prevention is the most effective form of healthcare, as it protects people from getting sick. Preventive measures include awareness campaigns and comprehensive education of the public. Prevention is a collaborative task that should be supported by everybody within the international health community. This is why Boehringer Ingelheim committed itself to awareness campaigns all around the world. For a healthier society.
In order to prevent diseases, people have to understand them first. Lack of knowledge is a threat to public health regarding both communicable diseases, such as HIV/AIDS, as well as non-communicable, chronic diseases. Particularly in low and least developed countries, the public often knows little about these diseases, their risk factors and symptoms – but also in highly industrialised countries, awareness needs to be raised and advise for a healthy lifestyle should be given. In order to meet this important challenge, Boehringer Ingelheim has devised a strategy of fighting diseases at its roots: by raising awareness and enabling populations to prevent disease wherever possible.
Combatting HIV / AIDS through voluntary counselling and testing

One of the main health threats especially to African countries is the widespread and still incurable HIV-virus infection leading to AIDS. More than 95 percent of people infected live in the developing world, with limited or no access to life-saving anti-retroviral drugs. Boehringer Ingelheim was the first company to design a programme to deter the growing epidemic by preventing mother-to-child-transmission (PMTCT) of HIV, grow capacity for according services and generally increase the level of information on the virus and its transmission.

The Viramune© Donation Programme reached out to women carrying the virus in order to accompany them through delivery and reducing the risk for children from being infected during birth or after. The programme had an awareness component and offered information, voluntary counselling and testing through the strategic partner Elizabeth Glaser Foundation, as well as an access to preventive medication component → ACCESS & TIERED PRICING SYSTEMS, p. 21. Through this, sustainable change was created and the number of new infections was ultimately reduced.

Reduce stigma in HIV/AIDS – trigger sustainable changes

The continuous dialogue with local partners, international agencies and NGOs allowed Boehringer Ingelheim to intensify advocacy and accelerate progress in decreasing the HIV infection rate. A thorough survey showed success and potential of the project: preventive services on the continent expanded, the stigma against HIV/AIDS was reduced, social support systems were strengthened, strong partnerships established and donor funding increased.

The Viramune© Donation Programme

In close cooperation with local organisations, Boehringer Ingelheim aimed to improve access to nevirapine for HIV-infected pregnant women in resource constraint surroundings all over the world, in order to decrease infection numbers significantly.

The programme included projects to support education and awareness for how the disease is spread and constrained, training medical staff to improve human resources and the level of treatment or developing guidelines and policies at a national level. Another component of the programme was drug donations.

- 2000 – 2013
- 164 unique programme in 60 countries
- more than 2.3 million mother-child pairs of nevirapine donated
The Viramune® Donation Programme was discontinued in December 2013 due to a change in treatment guidelines. However, the company continues to pursue its commitment to fighting HIV/AIDS. The products are available under the non-assert declaration scheme → ACCESS & TIERED PRICING SYSTEMS, p. 20.

Boehringer Ingelheim has issued the “First things first” campaign in cooperation with the Innovative Pharmaceutical Association South Africa (IPASA) which offers HIV counselling and testing to further improve awareness on the continent. In co-operation with Deutsche Stiftung Weltbevölkerung (DSW), Boehringer Ingelheim is also committed to securing adolescent health in Eastern Africa through education sessions on HIV prevention.

Understanding stroke symptoms - saving lives

Increasing disease awareness isn’t simply a task for the developing world. There are a number of diseases that strike suddenly and can have devastating consequences if the symptoms aren’t recognised, diagnosed and treated. One of them is acute ischaemic stroke, caused by the blocking of an artery in the brain. Acute stroke is a global healthcare problem that causes a substantial burden of disease; it is among the most common causes of death worldwide. Because stroke incidence is increasing more rapidly in low-income than high-income countries, the burden of stroke is increasing faster in poorer than in richer communities.

Clinically, stroke presents with neurological deficits as loss of facial mimic, speech as well as the ability to move the extremities on one side. Therefore, an important factor is enabling the patient and others to recognise these symptoms of a stroke and act accordingly: Time is the most important factor, since damage progresses quickly without appropriate diagnosis and treatment.

Two thirds of survivors suffer from permanent handicaps, the treatment of which makes out for around two to five percent of all healthcare spending. The good news: between 50 and 70 percent of all stroke cases – and the resulting injuries – could be prevented by a healthy lifestyle or the treatment of diseases that increase the risk for stroke, such as the metabolic syndrome, comprising obesity, high blood pressure and diabetes.

Boehringer Ingelheim has designed several initiatives in stroke prevention, combining activities in industrialised as well as developing countries. The global initiative encompasses access programmes as well as → ACCESS & TIERED PRICING SYSTEMS, p. 20. In the starting phase, this stroke programme mainly aims to educate the general public. To achieve this mission, Boehringer Ingelheim has teamed up with a number of partners, combining business know-how, governmental resources and social commitment, enabling the company to identify the most suitable approaches to stroke prevention. Another programme initiated in Mexico and Brazil promotes appropriate diagnosis and treatment of common cardiac conditions through provision of mobile ECG and innovative approaches such as an educational app.
mainly is to ensure awareness of stroke. This encompasses knowing whom to contact in the event or what measures to take in prevention, such as a change of lifestyle. Lastly, post stroke, most patients are left to fend for themselves, many suffer physical and mental injury and thus battle to adjust. A large part of the project is to equip a ward in order to offer physical therapy, speech therapy, counselling and adaptation not just for the patient, but also for caregivers and family members.

As a partner of the project, Boehringer Ingelheim will involve NGOs in Mauritius, actively engaging with the patient. The project’s main aim is to raise the number of up-skilled caregivers, nurses, healthcare professionals and wards equipped to deal with their patients. The plan is to pilot the project in Mauritius and use the lessons learned for this project in the design of similar undertakings in Sub-Saharan countries.

Pilot project Mauritius – reduce CVD burden

On the island nation of Mauritius, the population presents a very high genetic predisposition to cardiac disease, mainly due to its Indian ancestry. Myocardial infarction (MI) is common across all ages in Mauritius, with some patients in their twenties. Many forty year olds have had a second infarct. Stroke is also common in Mauritius, with young people suffering stroke on the increase. Unlike MI, stroke can have very subtle and indistinguishable symptoms, leading to very late patient presentation at the hospital – sometimes days or even weeks after the event, making it very difficult to reduce long-term damage.

Boehringer Ingelheim and Deutsche Investitions- und Entwicklungsgesellschaft (DEG) are working in a public-private partnership together with the Mauritian Ministry of Health to reduce the long-term damage caused by stroke. A number of facets are included in the project. Since the accident and emergency (A&E) have already implemented an efficient system of picking up patients and taking them to the correct centre to undergo treatment, the physicians are well trained and hospitals equipped adequately to handle the stroke patient, the aim of the project mainly is to ensure awareness of stroke.
Boehringer Ingelheim is about to start the Collaborative Innovation Lab in Stroke Prevention. Starting in India, the initiative aims to transform healthcare systems in low development and emerging countries, in order to reduce health hazards and deaths due to stroke. The Innovation Lab is one of several Boehringer Ingelheim initiatives worldwide, resulting from the company’s commitment to fight cardiovascular diseases.

**Stroke Collaborative Innovation Lab**

Boehringer Ingelheim is about to start the Collaborative Innovation Lab in Stroke Prevention. Starting in India, the initiative aims to transform healthcare systems in low development and emerging countries, in order to reduce health hazards and deaths due to stroke. The Innovation Lab is one of several Boehringer Ingelheim initiatives worldwide, resulting from the company’s commitment to fight cardiovascular diseases.

**Develop scalable models through Innovation Lab**

Prevention, diagnosis, treatment and long-term care of stroke isn’t always as straightforward as it sounds – sometimes, innovative ideas are required to save lives. Boehringer Ingelheim is therefore further scaling up its commitment to reduce the risk of stroke. With the “Collaborative Innovation Lab” designed in 2014, Boehringer Ingelheim and the NGO Ashoka → SOCIAL INNOVATION, p.26 aim to combine the best practices and innovations of entrepreneurs and then test specific multi-party field approaches to transform national stroke services.

India was chosen as the first geographic focus since it has the third highest number of deaths due to stroke globally. It is estimated that there are over one million strokes per year in this largest base of the pyramid (BoP) population in the world, with 200 million urban and 700 million rural poor. The initiative has made it its main objective to develop new scalable integrated models that reduce the incidence and burden of stroke in underserved populations. To achieve these goals, the Innovation Lab is based on three principles:

1. **Collaboration**
   The Innovation Lab is a collaborative, open process that brings together multiple perspectives and experiences, including health experts, NGOs and companies. Working groups on various stroke-related topics will help shape the guidelines for field testing.

2. **Synergies**
   Any information and research arising from Innovation Lab activities will be shared among all participants and, where possible, the public domain, in order to increase synergies, innovation and cross-pollination of ideas.

3. **Systems impact**
   The Innovation Lab is targeted towards transforming health systems. Improving access to health for local populations is complex and requires solutions beyond the mere treatment in order to create an enabling environment, where health-conscious behaviour is supported and individuals as well as communities are cared for appropriately.
While many diseases can be prevented through fostering a healthy lifestyle, it is imperative that patients receive the right treatment – administered by well-trained medical staff and facilitated by modern equipment. This is why Boehringer Ingelheim has made it its mission to build capacity by transferring technology together with governmental and non-governmental organisations, aiming to improve the standard of healthcare in resource-constraint countries. For reliable healthcare.
Boehringer Ingelheim regards capacity building as well as training and education of healthcare professionals as a crucial objective in any healthcare development policy in emerging countries. With its capacity building initiative, the company aims to improve the availability and quality of training as well as provide technology for medical and paramedical staff. In order to achieve this target, Boehringer Ingelheim has for many years been working closely with partners from academia, the public sector and civil society.
Clinical research on health issues for lasting improvement

An important step towards a healthier society is researching on and finding a cure for the main health issues. In 2000, Boehringer Ingelheim provided the funds to build South Africa’s first Lung Institute at the University of Cape Town. Founded as a public-private partnership of Boehringer Ingelheim and the University of Cape Town, the Boehringer Ingelheim Lung Institute promotes the training of scientists in clinical research in the country and the continent, housing five independent clinical research facilities covering wide areas of lung diseases, including asthma, chronic obstructive airways disease, occupational lung disease and tuberculosis (often associated with HIV/AIDS). The research units offer expert clinical services on an outpatient consultation basis. The Knowledge Transfer Unit facilitates the training of primary healthcare nurses in the use and prescription of antiretrovirals.

Adequate healthcare needs advanced education

Having identified diseases with high unmet medical need and their adequate treatment in low and middle-income countries, it is imperative to train medical staff to diagnose diseases and treat them appropriately. This is why most of Boehringer Ingelheim’s Access to Healthcare initiatives, such as the developpp.de initiative in Mauritius, include education programmes.

Another developpp.de project for training and education of institutions for improved pharmaceutical services is under way in Tanzania, where Boehringer Ingelheim, Merck KGaA and Bayer Healthcare AG support a development partnership with the German Federal Enterprise for International Cooperation (GIZ) and the Joint Conference Church and Development (GKKE). More importantly, the project constitutes the first cooperation of its kind, bringing together the three biggest German pharmaceutical companies in a combined effort to improve healthcare in the East African country.

Tanzania is one of the larger countries in Africa, covering nearly one million square kilometers and home to more than 40 million people – most of them living in rural areas. The country’s health...
sector is mainly defined by underfunding, resulting in lack of health services and inadequately trained medical personnel. There are currently less than 1,000 registered pharmacists, with only about 135 pharmaceutical technicians and 30 pharmaceutical assistants graduating each year.

An efficient healthcare system is in the interest of all stakeholders along the continuum of care – from patients to responsible authorities. Without appropriate infrastructure, well-trained medical staff and quality control, patients can’t get the help they need, and pharmaceutical companies cannot operate successfully. This is why the developpp.de partners start at the root of the Tanzanian problem: by supporting the Kilimanjaro School of Pharmacy in Moshi in improving the scope and quality of their training courses for assistant pharmaceutical staff. The pilot project entails supporting the launch of a new dispenser course by facilitating the development of required documents, like assessment plans or the standard training manual for pharmaceutical assistants and technicians. Moreover, the partners will provide funding for the harmonization of curricula and training materials with the criteria of the National Council for Technical Education.

Sharing knowledge and technology
Another long term initiative aims to improve the supply of medication in Burundi, through education programmes and technology transfer and establishing a local pharma production unit in terms of a social enterprise.

Partners in the initiative are the Senior Expert Service (SES), Human Help Network, the Fondation Stamm and Boehringer Ingelheim. As one partner within the initiative, Boehringer Ingelheim since 2008 supports the training of pharmaceutical-technical assistants at the École

40 mio.
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Burundi capacity building / technology transfer programme
Working with the SES, Fondation Stamm, Human Help Network and the Burundi government as well as local institutions, Boehringer Ingelheim is supporting medical schools in the East African country, in order to improve the level of training for medical staff. The company is also donating equipment, thereby supporting the setup of a local pharmaceutical production.

› 2008 – ongoing
› Improve excellence and total number of trained staff, expand school activities, and create new jobs in the health sector by supporting local production.
› 40 PTAs qualified, most of whom have found employment
“Working with Boehringer Ingelheim was a great step forward for me. At home, opportunities like this are very rare.”

PATIENCE CHINGOMBE PHARMACIST

Polyvalente Carolus Magnus (EPCM) in the capital of Burundi, Bujumbura. A specific four year training programme enables students to pass the A2 diploma for pharmaceutical technical assistants. For practical training within this programme, the school is equipped with several laboratories mostly provided by Boehringer Ingelheim.

The diploma is officially acknowledged by the Burundi government and qualifies students for higher education in connection with a governmental A-level exam. All teachers and trainers at EPCM are locals, the teachers for the pharmaceutical technical section were trained in GMP seminars, and the chemistry teacher was trained in terms of an internship at the production plant in Ingelheim in 2013. The school operates with great success and due to its popularity an expansion for up to 1,000 children is planned.

The second part of the project involves the setup of a local production plant (‘Burundipharm’) in terms of a social enterprise in order to secure availability of essential medicines in Burundi. Presently, a working group of experts is elaborating the details of this project. It would provide additional opportunity for employment of EPCM graduates. Up to now, nearly all EPCM students having left school found an engagement in Burundi.

Expertise through experience
A comprehensive and efficient healthcare system needs more than training and education activities. It takes commitment, passion and ideas to bring a society forward. Especially in developing countries, the identification and promotion of young talents is imperative for triggering longlasting progress.

Boehringer Ingelheim is one of the founding partners of “Afrika kommt!” (“Africa is coming”), an initiative supported by currently 19 leading German companies, as well as the giz (Deutsche Gesellschaft für Internationale Zusammenarbeit) which plans, organises and evaluates the programme.

Young professionals from Sub-Saharan African countries can apply for this programme, giving them the opportunity to gain insight on management, workflow and cooperation in German businesses. Participants spend nine months in a company fitting their specialisation, with access to further professional education. Each participant is supervised by the giz, providing technical and individual support as required. Returning home, they are enabled to use their experience to advance best practice in their field. The programme is also fostering the economic as well as cultural bond between Germany and the African continent.

“Afrika kommt!”

“Africa is coming!” is a programme arranging for young professionals from Africa to work in German companies. Besides the practical experience within the company, participants complete intensive language and managerial training courses. The companies pay all costs incurred and provide grants for the young executives. To date, four participants have been working in Boehringer Ingelheim’s R&D, Communications and Economic Sciences departments.

› 2008 - ongoing
› Advancing education and skills by giving young African professionals the opportunity to gain insight into German companies and management
› Establishing a strong professional, economic and cultural bond between Germany and Africa

www.afrika-kommt.de
Enabling society – improving life

A key initiative in capacity building was implemented in Brazil. The Jaborandi Valuation Project carried out in the in Brazilian states Piauí, Maranhão and Para, is a public-private partnership (PPP) of Boehringer Ingelheim with Vegeflora (a company of the Centroflora Group) and GIZ in Brazil.

The initiative fosters the sustainable management of the Jaborandi tree, a plant which is needed by Boehringer Ingelheim’s Phytochemicals department to obtain pilocarpin, an active ingredient of a medication which is being used for the treatment of glaucoma. Through training and certification of farmers and the organisation of local cooperatives, the initiative supports traditional rural communities in promoting the sustainable wild collection of the leaves, the collaboration of farmers across communities and an independent management of the sourcing activities.

While in the past, Jaborandi harvesters would pick the rainforest plant in a disorderly way – to the extent that it had been included in the list of threatened species – through the cooperative, harvesters are now registered and trained to perform a sustainable harvest, which ensures quick regeneration of the plant. Whereas before, workers were exploited by intermediate agents, entering the forest nowadays, all workers are identified by an identity card containing data such as quantity, location and date of harvest, thus ensuring fair compensation. Through the Jaborandi Valuation Project, field workers get paid by Vegeflora, thereby generating a fair income, enabling them to afford education and healthcare for their families.

So far, five communities in different regions of North and Northeast Brazil have been developed – three out of which already implemented a self-sufficient and independent management in 2013, while two are meanwhile close to becoming independent and still require only few time for monitoring and consulting support by the GIZ.
Provision of adequate and effective healthcare for patients in need is the main challenge for any health system in low and middle-income countries. The reasons why a large part of the world’s population does not have access to medications are manifold: financial issues or lack of healthcare insurance, insufficient infrastructure or natural disasters and conflict. This is why Boehringer Ingelheim brings medication to patients who need it most through sophisticated access programmes and tiered pricing models. For comprehensive healthcare.
The more apparent the disease and the weaker the infrastructure, the more access to medication becomes an issue. Boehringer Ingelheim has made it its mission to bring high quality medication to the people who need it – at affordable prices for patients and healthcare institutions. As part of its encompassing initiative to combat cardiovascular diseases, treatment and rehabilitation, Boehringer Ingelheim has already started several initiatives in different countries around the globe.
Stroke is the second leading cause of death throughout the world and the leading cause of death in middle-income countries. The WHO estimated that there were 5.7 million global deaths (9.7 percent of all deaths) from stroke in 2004. Almost 90 percent of these stroke deaths were in low and middle-income countries.

Thrombolysis is the most effective treatment of acute ischaemic stroke – but studies have shown that, even though up to 25 percent of patients might be eligible for this treatment, less than three percent actually get it. One of the reasons is lack of affordability and access to the required medication, especially in developing countries. Starting with Colombia, Ecuador and Brazil, Boehringer Ingelheim therefore offers a tiered pricing model for their alteplase medication, which is used in the thrombolytic treatment of acute ischaemic stroke.

The tiered pricing model ensures that patients and institutions with limited financial resources benefit from a range of price reductions. Simply providing medication is not enough. Medical staff and pharmacists need to be trained to administer them appropriately. The programme therefore also entails workshops for physicians and hospital personnel, concentrating on prevention, diagnosis and treatment of acute stroke. Through this, Boehringer Ingelheim aims to ultimately reduce the number of deaths and disabilities caused by this disease.

Another access initiative currently enrolled in Ukraine and the Philippines offers a 50 percent price reduction on medications for the prevention of stroke in patients with atrial fibrillation through electronic patient access cards. The prescribing physician decides upon the eligibility and inclusion of the respective patient who receives the medications.

Non-assert declaration for antiretroviral
For the effective treatment of HIV, Boehringer Ingelheim took an important and innovative step in May 2007: in order to substantially extend access to the active ingredient nevirapine, Boehringer Ingelheim decided to not enforce its patents and offers interested generic manufactures...
listed on the WHO pre-qualification programme (or being FDA approved) non-assert declarations enabling them at no additional costs to supply nevirapine-containing medicines for eligible countries. These eligible countries are defined as all Low-income Country according to the World Bank classification of economies, all countries classified as Least Developed Country (LLDC) according to the United Nations Development Programme (UNDP) and all other African countries.

Viramune© Donation Programme
A good example of how a well-devised initiative can trigger long-lasting changes is the Viramune© Donation Programme facilitating access of anti-retroviral drugs for pregnant women with HIV/AIDS. From its inception in 2000, it reached more than two million mother-child-pairs in 164 programmes stretching over 60 countries worldwide. Since the discontinuation of the programme in 2013, Boehringer Ingelheim has been committed to facilitating access to life-saving anti-retroviral drugs in resource-constraint settings. In addition to the non-assert declaration, the company supplies the pediatric formulation at a not-for-profit price, in order to accommodate the considerably longer period of pediatric dosing recommended in the new WHO guidelines.

Boehringer Ingelheim Cares Foundation
For Boehringer Ingelheim, facilitating access to medicines is not just a question of singular initiatives and programmes. In 2001, the Boehringer Ingelheim Cares Foundation, Inc. was formed in the USA, with the task to improve lives – in the USA and around the world – through financial contributions as well as donations.

The Product Donation Program PDP is a critical part of the Cares Foundation. In strict compliance with US tax regulations and adherence to highest standards of delivery, Boehringer Ingelheim aims to help underserved populations and disaster victims around the world. Through the Cares Foundation, Boehringer Ingelheim products are donated to non-profit partners distributing them globally. Whether it is destruction caused by natural disasters, political conflicts or epidemics, Boehringer Ingelheim brings fast relief with PDP to those who need it most. Countries that recently benefited from PDP include the Philippines, Haiti and Ghana.

Through the Patient Assistant Program PAP, the Cares Foundation makes Boehringer Ingelheims branded medicines available free of charge to patients in need and without prescription insurance. In 2013 alone, more than 70,000 patients received assistance, and more than 170,000 prescriptions were delivered to poor US residents.
Comprehensive healthcare: Access initiatives in Brazil

To Help is the Best Medicine
The institutional programme “Ajudar é o melhor remédio” (“To Help is the Best Medicine”) launched by Boehringer Ingelheim do Brasil in 2010, fosters engagement in social, environmental and health issues. Through its Facebook page and website it encourages cooperative participation, calling on visitors to become volunteers with small initiatives in the region.

PEC – Continued Education Programme for Pharmacists and Pharmacy Clerks
Half of Brazil’s 57,000 pharmacies and drugstores operate irregularly, without a technician in charge full time. This is why the PEC (Programa de Educação Continuada para Farmacêuticos e Balconistas) was set up. It consists of a free online course for pharmacy clerks, pharmacists and students, in order to qualify them for better patient service. So far, around 29,000 pharmacists and pharmacy clerks have participated in this programme supported by Boehringer Ingelheim.

1.2 mio.
Between June 2012 and January 2014, 1.2 million patients received free of charge asthma drugs included in the programme.

Ipratropium bromide (Atrovent®) - “Saúde não tem Preço” Programme
“Saúde não tem preço” (“Health is priceless”) is part of a Brazilian Ministry of Health Pharmaceutical Assistance Programme that provides free access to a variety of hypertension and diabetes drugs and since 2012 includes a variety of asthma drugs. Between June 2012 and January 2014, 1.2 million patients received free of charge asthma drugs included in the programme. Boehringer Ingelheim Brazil is part of this important programme that aims at expanding access to Atrovent® by underprivileged patients throughout the country.

Private-public partnership (PPP) for pramipexole IR
In 2011, Boehringer Ingelheim Brazil and the Ministry of Health executed a cooperation agreement to transfer technology used in the treatment of Parkinson’s disease, in order to reduce the cost of treatment and speed up drug access for patients. It will also allow the government to reduce the country’s dependence on imported drugs. This partnership reflects the vision of Boehringer Ingelheim: health, well-being and innovation accessible to humankind.
Drug donation protocol
In order to insure access and maintenance of patients’ treatment, in 2013, Boehringer Ingelheim set a new protocol for donation of company’s drugs. The project aims to insure availability of the correct drug, even if it cannot be purchased at the point of sale. The Consumer’s Service (SAC) proposes free delivery of the drug to the patient’s home, after presenting the medical prescription. The number of people who benefited in 2013 was 4,072.

Tipranavir – Federal reimbursement for third line HIV+ patients
In 2013, the Brazilian clinical protocol for treatment of HIV patients was approved and included tipranavir as an option for adults in third line treatment. Brazil is the only country to include tipranavir in the clinical protocol to treat HIV adult patients. Boehringer Ingelheim sells tipranavir directly to the Ministry of Health with significant discounts to expand access to the drug.

Jaborandi valuation project
This initiative fosters social and economic organisation of traditional rural communities, so that they can extract, produce and market Jaborandi in a sustainable form. The number of people who benefited until 2013 was 1,000. For more information on this project, see CAPACITY BUILDING, p. 17.

Tenecteplase and alteplase reimbursement for thrombolytic therapy
Boehringer Ingelheim Brazil developed a common agenda with the Ministry of Health to add medicines used in the thrombolytic therapy of acute myocardial infarction and stroke to the reimbursement list, improving access for the patients by offering a significant discount for those products. For more information on the project see this chapter, p. 20.
A healthy society is defined by more than just comprehensive access to healthcare. It strives to identify and support the most promising solutions to its most challenging health problems – from poverty relief to sustainable resource management. This is why Boehringer Ingelheim and the NGO Ashoka have started “Making more Health”, a long-term initiative with the goal to improve health in communities around the world by bringing together business and social knowledge. For a prosperous society.
Establishing a more efficient and comprehensive healthcare system is an important step towards more health. Today’s global health challenges, such as lack of disease awareness, diagnostics and treatment capabilities and capacities, a lack of availability of medications, a public sector with restricted resources to implement an adequate healthcare system and inadequate financing of access to healthcare, impede societies in low and middle-income countries to develop sustainably and prosper in the long-term. More than four billion people with insufficient access to healthcare are proof that a different approach in problem-solving is required.
To mark its 125th anniversary in 2010, Boehringer Ingelheim established Making More Health (MMH) in partnership with Ashoka, the world’s largest network of social entrepreneurs. Making More Health is a global social initiative to identify new and better ways of improving health. Issues of intellectual property, market access and pricing strategy call for unusual solutions – and Making More Health is aiming high: the initiative strives to source social innovation around the world, to explore unconventional partnerships and innovative healthcare solutions, and to include and develop Boehringer Ingelheim employees in the process.

Reaching out to social innovators
The most pressing threats to health around the world will require new types of collaboration between companies, NGOs and governments, which will build on their diversity in perspective, approach and capability to improve access to health. The way Making More Health wants to reach patients and improve health systems worldwide, particularly in lower income populations, is therefore different to any initiative designed in the past.

Under the umbrella of Making More Health, Boehringer Ingelheim and Ashoka have embarked on a journey to explore the field-based activities of people around the world known as social entrepreneurs. These individuals implement new ideas to improve health in their communities. In partnership with this growing network, the initiative creates social and economic impact on public health – which will play a key role for patients and providers, and ultimately bring society itself forward. Boehringer Ingelheim is using two different strategic pillars to source innovation in health.

Social entrepreneurs
The first step is the identification of promising social entrepreneurs, known as Making More Health Fellows. The initiative supports more than 60 Fellows all over the world, mostly out of the Ashoka network (status February 2015). Making More Health Fellows work on innovative solutions for the most urgent social challenges and
health threats, including long-term care, medicine, mental health, nutrition, acute care and sanitation.

Most Fellows are active in emerging countries, such as India, South Africa, Kenya, Brazil and Columbia. Health challenges in those regions are diverse, but also provide an opportunity to identify and implement new approaches in a collaborative effort.

The initiative also invites the general public to enter their own ideas in online competitions hosted by Ashoka Changemakers, with the opportunity to win monetary prizes and gain recognition. The various ideas identified by Making More Health’s Open Innovation Funnel could alter healthcare systems by introducing efficient, low-cost solutions that facilitate access to and increase the standard of healthcare worldwide.

Executive in Residence
Making More Health is also fostering a customer-centric culture of innovation at Boehringer Ingelheim by bringing new opportunities to employees through personal and professional development and volunteering programmes. Employees have the chance to work directly onsite with social entrepreneurs through the Executive in Residence (EiR) programme.

The programme encourages high-impact collaborations between Boehringer Ingelheim leaders and social entrepreneurs with the potential to change the dynamics of traditional markets, enhance competitiveness, and create systemic social impact.

This creates a win-win situation for both parties: While Boehringer Ingelheim employees provide specific business skills to Making More Health Fellows, they can also gain and develop valuable leadership competencies from those experiences.

The executives are asked to support fellow activities by developing further marketing and communications activities, by transferring knowledge and know-how on sales and account management processes and by networking across traditional borders. Employees are also encouraged to initiate their own ideas to improve health in the workplace or community.

Youth Venture Programme
In addition, the initiative supports the next generation of talent by engaging employees in the Youth Venture Programme, where youth entrepreneurs design, implement and receive support for their own health solutions.

In the last three years, Making More Health has launched over 300 Youth Venture projects, giving adolescents and young adults between the ages of twelve and 24 the opportunity to develop critical skills such as team building, leadership, problem-solving and ethical fiber by launching and leading their own organisations. Eight Boehringer Ingelheim country offices have been hosting Youth Venture workshops and Youth Venture teams up to date.
Boehringer Ingelheim employees actively support the youth in the programme by serving as mentors and coaches. They pass on their knowledge, network and experience and are in a close dialogue with the Youth Venture participants.

**Building bridges between social innovation and sustainable marketplaces**

Since the start of Making More Health in 2010, a huge number of projects have been launched by sourcing social innovation to provide more health in the future. The initiative has been implemented in over 30 countries today. Based on its success, Making More Health will proceed to explore innovation at the intersection of social and business outcomes (business is understood as supporting the development of sustainable marketplaces). In the long term, these innovations could contribute to the spread of new models that increase access to health for underserved populations.

Furthermore, Making More Health will go on to support additional new Fellows and continue talent development efforts by helping employees collaborate with these social entrepreneurs. The initiative seeks to explore it’s contribution on social innovation and at the same time aims to bring this insight back to business – and ultimately create shared value.

For the company, Making More Health is more than just an initiative. It is a mission where business and social values can be combined to unleash innovation and achieve both economic and social progress.

For further information please visit the global Making More Health website: [www.makingmorehealth.org](http://www.makingmorehealth.org)
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**From Brazil to Ireland**

Thalita Guimarães, Senior Product Manager with Boehringer Ingelheim Brazil, was selected to participate in Boehringer Ingelheim’s Executive in Residence programme and spent six months working with MyMind in Ireland.

Founded by Making More Health Fellow Krystian Fikert in 2006, MyMind strives to bring affordable and empathetic, community-based mental healthcare to those who need mental health support. Through its network of paid and pro bono therapists and mental health professionals, MyMind expects to serve more than 2,000 clients in 2013.

Thalita’s role was to help MyMind strengthen their core processes and develop new strategies for income generation and to implement non-conventional, innovative and highly cost-effective marketing tools as well as create strategies for engaging new partners and donors.

**Pioneers of health: MMH Fellows in focus**

- **Perinatal Mental Healthcare Project, South Africa**
  Enabling public health workers to engage and treat common mental illnesses in pregnant and postnatal women (e.g. depression and anxiety).

- **Suryani Institute for Mental Health, Indonesia**
  Expanding the definition of a mental healthcare provider, offering low-cost mental health treatment and rehabilitation while involving different groups in the recovery process.

- **The Banyan / thebanyan.org, India**
  Using a community care approach to treat and rehabilitate mentally ill homeless women.
Access to healthcare is important to society’s ability to address unmet medical needs, combat global poverty and foster economic development in underserved populations. It is also an integral part of the Universal Health Coverage (UHC) approach, which is on the global Public Health agenda of international organisations like the World Health Organization (WHO).
Universal Health Coverage (UHC) shall be implemented with the means of the Global Action Plan for the prevention and control on non-communicable diseases (NCD), endorsed at the UN high-level meeting in July 2014. Specific emphasis is put on NCD and chronic diseases.

As NCD will be the predominant health challenge of the 21st century, our access to health activities mainly focus on chronic diseases, on their complete life course and the respective extension of patient coverage.

We are convinced that partnerships between the private and the public sector, as well as the civil society, are the most effective method for developing and implementing healthcare solutions to support underserved populations and to address health challenges in the area of non-communicable and chronic diseases.

Furthermore, external social innovation to address future health challenges, to accelerate the discovery of new healthcare solutions and to make a sustainable impact on health is fostered through our Making More Health initiative.

We regard our involvement in collaborative access to healthcare programmes not only as active corporate citizenship, but as an integral part of our business model, which is reflected by cooperative approaches and public private partnerships.
Overview of ranked activities and partnerships:

External Ranking: Access to Medicines

The Access to Medicines (atm) Index is an initiative of the Access to Medicines Foundation. In the 2014 survey and ranking of the Access to Medicine Foundation, Boehringer Ingelheim ranked 14th out of 20 pharmaceutical companies under review for its access to healthcare activities driven by public-private partnerships.

Furthermore, stimulating social entrepreneurship to improve health through our Making More Health Initiative (MMH) scored as best practice. The fellowship programmes run with the network organisation Ashoka supports local social entrepreneurs working to improve health in their communities.
Public-private partnerships:

- Tanzania (training and education of pharmaceutical assistants), together with giz, action medeor, and German pharmaceutical companies
- Burundi (training of pharmacists and local technology transfer), together with Senior Expert Service, Human Help Network, Fondation Stamm
- Mauritius (training of physicians and nurses and technology transfer), together with deg and giz
- Brazil, Jaborandi project (training of leaf pickers for sustainable harvesting of the Jaborandi shrub), together with Vegeflora and giz.

According to ATM index

- **in scope, with sales**
- **in scope, without sales**
- **not in scope**