

# Charter on Access to Health in Developing Countries

## Our Approach

April 2019

**“Improving the health of underserved populations is a strategic priority of our corporate responsibility and global health activities. We seek to push the boundaries of possibility to create opportunities for everyone.”**

*Stefan Oschmann, Chairman of the Executive Board and CEO of Merck KGaA, Darmstadt, Germany*

**“We have made outstanding progress in the last five years and we remain committed to sustainably deliver healthcare solutions to help the two billion people worldwide, who still lack access to effective and affordable healthcare.”**

*Belen Garijo, Member of the Executive Board of Merck KGaA, Darmstadt, Germany, and CEO of Healthcare*

## Our Promise

As a leading science and technology company, we discover and develop for life in all its vibrancy, drawing on our unique expertise in healthcare, life science and performance materials. At Merck KGaA, Darmstadt, Germany, we work to achieve progress for people, communities, populations and society. Our global network of scientists, experts and thought leaders is driven by the passion to explore and the prospect of making a meaningful difference in the world. As the oldest pharmaceutical and chemical company in the world, founded in 1668, we have developed countless innovations that improve people’s lives.

Unfortunately, millions of people still lack access to the benefits of modern health care innovations in developing countries.<sup>1</sup> We are committed to improving the health of underserved populations, who lack access to health solutions including prevention, diagnostics and treatments. By enhancing availability, accessibility and affordability of our products, and by raising awareness in communities, we work to provide quality, safe health solutions for all.

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<sup>1</sup> For a full list of developing countries, refer to Figure I.



Access to Health (A2H) is a strategic priority for Merck KGaA, Darmstadt, Germany and is an important part of the corporate Global Health strategy. Through our global health strategy, we aim to improve the health of underserved populations in low and middle-income countries through Merck KGaA, Darmstadt, Germany's science and technology innovation, together with external partners.

Our A2H strategy is designed to contribute to overcoming barriers to access for underserved populations and communities in developing countries in a business integrated and sustainable manner, thereby creating "shared value." For Merck KGaA, Darmstadt, Germany, creating shared value means not only developing business models to enhance competitiveness but to also solve unmet health needs through solutions that bring value to underserved populations in addition to the company.

Recognizing that access is a complex and multifaceted challenge with no one-size-fits-all solution, our programs and initiatives are tailored to global, regional and local needs. We take a holistic approach working in partnerships to achieve results. Our A2H work cuts across our business and is a component of our Corporate Responsibility strategy. A2H responsibility is led by Dr Petra Wicklandt, Head of Corporate Affairs, and Dr Manfred Klevesath, Head of Global Health, Corporate Affairs.

## Access to Health in Developing Countries

Across the globe, two billion people do not have access to medicines. At least half of the world's population lacks access to essential health services and 100 million people are pushed to poverty due to health expenses.<sup>2</sup> Developing countries bear 87% of the world's disease burden,<sup>3</sup> yet only account for 32% of global health spending.<sup>4</sup> Providing access to health in these countries is a complex challenge. Improving access involves researching, developing and refining health solutions, creating efficient health systems and distribution channels, offering products at affordable prices and empowering health workers and patients. All health stakeholders, both public and private, must pool their efforts to overcome health access barriers.

In contributing to providing access to health in developing countries, we work at the interface of medicines, diagnostics, and chemicals, utilizing our local and global presence, expertise and core competencies. For instance, we produce a range of essential medicines that are included in the WHO Essential Medicines List. 67% of Merck's medicines and products are listed on the WHO Essential Medicines List and 29 and/or as 1<sup>st</sup> line treatments.<sup>5</sup> Our products are available in over half of Least Developed Countries (LDCs) including countries such as Afghanistan, Benin, Burkina Faso, Ethiopia, Haiti, Mali, Myanmar, Nepal, Senegal, and Sudan.

We are currently helping to improve access to health in all developing countries through commitments made in our A2H Charter and our targeted activities. We involve all our businesses, affiliates and

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<sup>2</sup> Please see: <http://www.who.int/news-room/detail/13-12-2017-world-bank-and-who-half-the-world-lacks-access-to-essential-health-services-100-million-still-pushed-into-extreme-poverty-because-of-health-expenses>

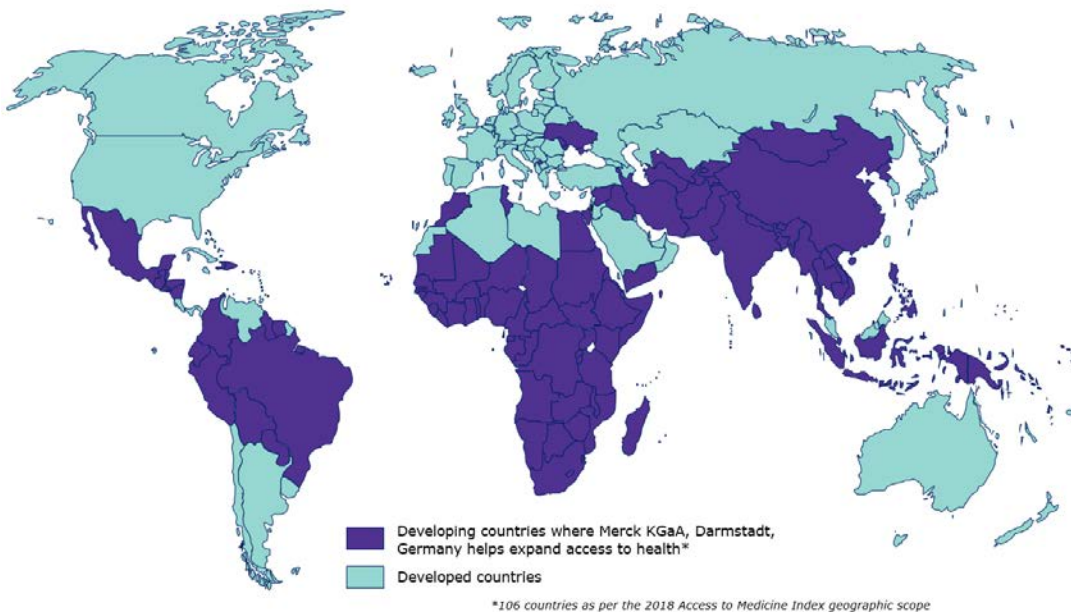
<sup>3</sup> Dalberg analysis (2018) based on DALYs lost across the World Bank's Low Income, Lower Middle Income and Upper Middle-Income country brackets in 2015, relative to losses across all income country brackets. Source: <http://ghdx.healthdata.org/>

<sup>4</sup> Dalberg analysis (2018). Global health spending figure based on the population of the World Bank's Low Income, Lower Middle Income and Upper Middle-Income country brackets in 2015, multiplied by the 2015 health expenditure per capita (PPP, current international \$) and as a proportion of total health expenditure across all income country brackets. Source: <https://data.worldbank.org/>

<sup>5</sup> Based on 2018 ATM Index analysis

employees in our access work. Our employees abide by high ethical standards, including this A2H Charter for Developing Countries, company rules, local laws and regulations. Our products are produced in manufacturing plants that meet global Good Manufacturing Practices (GMPs) and Good Distribution Practices (GDPs).

**Figure 1: Countries in which we help expand access to health**



## Our Approach and the Four A's of Access

Our vision is to become a valued partner in addressing and contributing sustainably to the global health needs of underserved populations and communities, regardless of their location and ability to pay. In all we do, we uphold our core values and the principles of quality, collaboration, accountability, transparency and respect for human rights. We leverage our core competencies, expertise, knowledge and experience across the health value chain in order to address barriers in access to health in developing countries. We aim to achieve this goal through a strategic focus on our Four As of Access.

**Figure 2: Our Four As of Access**



- **Availability:** Research, develop and refine health solutions that address unmet needs and are tailored to local environments across the spectrum of prevention, diagnostics, treatment, care and support.
- **Affordability:** Assist public and private health workers, partners, communities and patients who are unable to pay for the health solutions they need.
- **Awareness:** Empower public and private health workers, partners, communities and patients with appropriate tools, knowledge, information and skills towards quality and informed decision making around the spectrum of prevention, diagnostics, treatment, care and support.
- **Accessibility:** Strengthen supply chains and develop localized health solutions to deliver and reach out efficiently at the point of care, thereby allowing public and private health workers, partners, communities and patients to consistently access health solutions, irrespective of their geographical location.

Our approach to delivering initiatives along our Four as of Access involves a four-step process:

- **Diagnose:** We identify the unmet needs of underserved populations and communities in developing countries.
- **Design:** We develop business-integrated approaches to provide support given our expertise, knowledge, capacity and core competencies and our partners' experience.
- **Implement:** We implement innovative solutions in collaboration with our partners to meet needs in a sustainable way.
- **Evaluate:** We monitor and evaluate programs to ensure that we achieve the outcomes desired and, where necessary, we reorient our program to optimize results. We report on results through our dedicated A2H Website and the Merck KGaA, Darmstadt, Germany Corporate Responsibility report.

**Our approach is needs-based.** We aim to deliver outcomes by responding to stakeholders' needs, ensuring that we offer patients access to high quality safe health solutions irrespective of their location and ability to pay. In all our Access to Health initiatives, we support principles that are non-discriminatory and that respect human rights.

**Our approach is integrated across the health value chain.** There is a growing consensus in the global health community and within the pharmaceutical industry that sustainable access requires an integrated approach across the health value chain so as to deliver complete solutions unhindered by bottlenecks. Our Four As of Access is aligned with this consensus, as outlined in figure 3 below.

**Figure 3: How our Four As of Access integrate into the health value chain**



**Our approach is outcome-oriented.** We believe that it is important to monitor and evaluate our access to health programs in order to better understand how we are meeting patients' needs. We commit to developing quantitative and qualitative indicators across all "Four As of Access" which will be evaluated regularly to help us assess our strengths and areas where we can further strengthen our

efforts to expand access to health.

**Our access to health approach is embedded in our internal and external strategies.** Internally we aim to integrate access considerations into key businesses, regions/countries and functions, so that all Merck KGaA, Darmstadt, Germany employees are access “agents of change”. Externally, we promote access through our collaborations, dialogue, and partnerships, triggering change in cooperation with private and public stakeholders, as well as encouraging and nurturing unconventional collaborations.

**We utilise a robust accountability system to advance our commitments to access to health.** Not only does our Access to Health strategy include clear priorities, which have been translated into specific objectives, measures and targets, but we also work continuously on building a system that tracks employees’ progress toward their individual performance objectives. This system is necessary to ensure progress on our access to health targets, and to continue to meet the needs of the people we serve. Through accountability, we are also committed to increasing awareness and transparency.

**Our performance management system is composed of various monitoring and evaluation tools and processes, and we are constantly working on refining it.** We proactively engage, both internally and externally, in initiative and research projects focused on monitoring and evaluation. We aim at refining or finding new tools and processes to enhance the monitoring and evaluation exercise. Our efforts are spread across all the steps of the monitoring and evaluation process.

Specifically, we classify the tools and processes according to five phases in the monitoring and evaluation process:

1. **Generate awareness:** Initiatives through which we seek, internally and externally, to identify and understand specific monitoring and evaluation opportunities and needs. These include dialogue sessions, conferences and round tables on M&E. We want to ensure we develop the means to improve our existing tools and processes. We also use these occasions to create consensus on how to allocate resources to M&E and engage group functions and business units.
2. **Identify principles:** We conduct research and engage in initiatives that help give a concrete form to M&E opportunities. With this set of initiatives, we look to develop and refine guiding principles of our monitoring and evaluation exercise, including high level frameworks, outcomes, and methodologies.
3. **Identify metrics:** We work internally and cooperate externally to be up to date on relevant metrics and refine the ones we have in place. We also invest in developing knowledge on how to best measure intangible outcomes, that are an essential component of the success of Access initiatives. We dedicate particular attention to aligning our metrics to SDGs metrics, as our commitment is to play a leading role in the international development agenda.
4. **Gather data:** We have specific tools that allow us to collect relevant information on performance and outcomes. With the data we gather, we explore approaches to quantify, measure and value the environmental, social and economic impact of our Access initiatives and social activities.
5. **Learn, improve, scale:** We have processes through which we systematically review outputs and outcomes, and allow us to understand how to improve and scale successful initiatives. We do not limit our commitment to standard yearly reviews. We have specific

programs to leverage knowledge and insights we gain from systematic reviews to support and scale promising Access initiatives.

## Generating Awareness: Merck KGaA, Darmstadt, Germany Access Dialogue Series

The Merck KGaA, Darmstadt, Germany Access Dialogue Series has been launched as a multi-stakeholder platform for sharing information and exchanging best practices amongst relevant internal colleagues and external stakeholders. Through the Access Dialogue series, we nurture regular and ongoing discussions on access priority issues and opportunities for collaborative actions around barriers to access challenges with public and private stakeholders and experts. The outcomes of the series inform and drive our access strategy, plan of action and engagements. Our objective is to initiate a creative shift towards a proactive and collaborative approach around our Four As of Access for underserved populations in developing countries. This process is intended to be an open space for insightful and critical dialogue on how Merck KGaA, Darmstadt, Germany and partners can best use our respective capacities, experience, expertise and competencies to sustainably address access barriers. Our dialogues address innovation, donations, clinical trials, transparency, counterfeiting, R&D for NTDs, pharmacovigilance, innovative pricing and supply-chain/delivery challenges, universal health coverage, as well as innovative intellectual property and access.

## Identifying Principles: Accessibility Platform

Launched in 2014, the Accessibility Platform is an informal, multi-stakeholder effort of public and private actors to address supply chain and delivery challenges in developing countries. This multi-stakeholder initiative aims to raise awareness; promote information exchange and best-practice sharing; and identify potential opportunities for collective action. The Platform is a unique global health initiative that brings together expertise and knowledge from the supply chain and global health sectors.

The Accessibility Platform has a Statement of Purpose which highlights the commitment of its members to carrying out its aspirations. The Statement has already been signed by the heads of supply chain and access to health of Merck KGaA, Darmstadt, Germany, Roche, Sanofi and Novartis.

The Statement highlights seven principles to which the Platform adheres:

1. Recognizes that access is affected by a range of complex and interlinked issues
2. Understands that there is no one-size-fits-all solution
3. Believes that there are opportunities to improve patient safety by strengthening supply chain and delivery mechanisms
4. Engages in a holistic and comprehensive approach to understanding accessibility challenges
5. Responds to real needs in areas where we can collectively add value
6. Recognizes that we cannot work alone
7. Finds shared, effective solutions, including supporting the efforts of other entities

The Statement also points out the four priority areas for the Platform:

1. First Mile
2. Last Mile
3. Capacity-Building
4. Awareness/Evidence-Based Advocacy

For more detailed information on our Charter positions, and information on our current engagements, please consult our A2H website and our Corporate Responsibility Report.

## Partnering for Change: Our Rationale

**We recognize that we cannot work alone to address all the access gaps and achieve the change we seek.** By leveraging our assets and core competencies across businesses, we strive to deliver sustainable quality health solutions along the whole health value chain in alignment with the transversal UN Sustainable Development Goals (SDGs) framework. We promote our embedded access to health approach and strategy internally and externally. Internally we aim to integrate access considerations into key businesses, regions/countries and functions, so that all Merck KGaA, Darmstadt, Germany employees are access “agents of change”. Externally, we promote access through our collaborations, dialogue, and partnerships, triggering change in cooperation with private and public stakeholders, as well as encouraging and nurturing unconventional collaborations. The Merck KGaA, Darmstadt, Germany A2H Ambassador Network is a key element of our external and internal efforts to promote our embedded access to health approach and strategy.

### Merck KGaA, Darmstadt, Germany A2H Ambassadors Network

A2H ambassadors across regions/countries, functions, and businesses have been identified and designated. These A2H ambassadors' mandate is to move access to health forward within the company and implement initiatives to embed access in Merck KGaA, Darmstadt, Germany's DNA across their regions/countries and functions. Our dedicated A2H ambassadors represent a variety of functions, and therefore inform and deliver upon our efforts and commitment to improve access to health with their knowledge, experience and technical expertise. This approach ensures that access to health is built into the company's value chain, thereby helping us create shared value, build in sustainability in all that we do, and align our efforts with Merck KGaA, Darmstadt, Germany's core business. This is what we call at Merck KGaA, Darmstadt, Germany “embedded access to health strategy and approach.” Our A2H Ambassadors include colleagues Drug Safety, Supply Chain & Manufacturing (GMS/SNO) and Life Science, among others. These colleagues have an opportunity to share their experience and approach towards embedding access within their functions through

**We believe that partnerships, collaboration and dialogue are key to delivering sustainable access results and making great things happen.** We engage and collaborate with partners including multilateral organizations, governments, non-governmental organizations, civil society, foundations, research institutions and academia, health care professional associations, patient organizations, think tanks and private sector partners.

## Partnering for Change: Our Approach and Partnerships

**We have a structured approach through which we select, engage, and incorporate stakeholders.** The four steps of this strategy are:

1. **Diagnose opportunities within the group stakeholders:** We engage with stakeholders along the entire health value chain, and we seek stakeholders that can support one or more needs related to the 4As of Access.

2. **Prioritize.** We prioritize stakeholders based on six criteria that we believe make for an effective partnership.<sup>6</sup>

- i. **Alignment with vision and objectives.** Stakeholders need to share Merck KGaA, Darmstadt, Germany's desire to improve access to health and contribute to the international development agenda. This is key to ensure that the objectives of a potential partnerships can be aligned.
- ii. **Concrete ideas/goals for cooperation.** We need to be able to envision concrete ways for how we can cooperate with partners. When approaching stakeholders, we want to install a constructive dialogue and be able to rapidly turn ideas into clear commitments.
- iii. **Long term potential.** We prioritize partnerships that have the potential to last over time, to leverage the full potential of a cooperation and avoid wasting resources.
- iv. **Mutual interest.** We pursue engagements where the mutual benefits are clear. We want our partners' work and commitment to be adequate for the task. Hence, when prioritizing, we try to understand not only how stakeholders benefit Merck KGaA, Darmstadt, Germany, but also if there is potential for Merck KGaA, Darmstadt, Germany to benefit them.
- v. **Potential synergies across initiatives.** We prioritize engagements that can contribute to multiple initiatives, to fully leverage the potential benefits of the partnership in a resource efficient way.
- vi. **Risks.** Every decision is accompanied by a risk assessment, to exclude conflicts of interest, and avoid incurring in negative impact on integrity, independence, credibility, and reputation.

3. **Stakeholder engagement.** In 2018 Merck KGaA, Darmstadt, Germany has established the new Corporate Affairs department with new Key Account Management (KAM) team structures to transparently and effectively leverage important external stakeholder relationships. Merck KGaA, Darmstadt, Germany has realized that a clear and internally-aligned operational framework is required to transparently and sustainably manage global partners. Each external, global stakeholder requires therefore an Account Team or at least a Key Account Single Point of Contact (Key Account Leader).

4. **Implement feedback and cooperation.** We value our stakeholders and we systematically ensure that we integrate their perspectives in all that we do. Our partnerships are based on cooperation and dialogue, and the roles of each stakeholder are clearly defined from the beginning. This is key to ensure value is created for all the stakeholders involved and that the commitment is sustained over time. We have regular meetings, consultations, hearings and dialogues with stakeholders to incorporate their perspectives and feedback.

**Based on this process Merck KGaA, Darmstadt, Germany has begun participating in a wide variety of networks, programs and fora** such as the African Network for Drugs and Diagnostics (ANDI) and the WHO's Special Programme for Research and Training in Tropical Diseases (TDR). We sponsor the Geneva Health Forum and its associated Geneva Innovation Network, and we are a member of Rx-360, responsible for developing a global quality system that helps ensure patient safety. We work closely with the International Alliance of Patients' Organizations (IAPO) and local counterparts to promote patient awareness and to advance patient-focused initiatives for developing countries.

We have participated in the United Nations Global Compact since 2005. We abide by the Compact's ten principles and in doing so promote and enforce fundamental values in human rights, labor standards, environmental protection and the fight against corruption. The Merck KGaA, Darmstadt, Germany

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<sup>6</sup> The same criteria are used to evaluate requests from external stakeholders to participate in new partnerships.



Human Rights Charter serves as our framework to guide our decision-making to ensure we uphold the human rights of all the patients and partners we work with in countries as well as at the global and regional levels. We are signatories to the Business for Social Responsibility (BSR) Principles on Access to Healthcare.

We are a member of the Gates CEO Roundtable for Global Health and are a signatory to the January 2012 London Declaration on Neglected Tropical Diseases (NTDs). The London Declaration is an unprecedented public-private effort to eradicate, eliminate and intensify control of 10 of the 17 NTDs in order to contribute to the WHO 2020 NTD targets. Other London Declaration signatories include: the World Health Organization, World Bank, endemic NTD countries, governments of the United States, United Kingdom and United Arab Emirates, the Bill & Melinda Gates Foundation and 13 biopharmaceutical companies.

**We are also sponsors, speakers and contributing participants at conferences and multi-stakeholder fora focused on developing countries**, such the World Health Summit. We contributed to the UN Secretary General's High-Level Panel on Access to Medicines and the joint High-Level Commission on Health Employment and Economic Growth. We are participating in consultations with the UN Interagency Supply Chain Group (ISG) as well as with WHO and UNICEF on how public and private partners can collaborative work together to help strengthen supply chain systems in developing countries. We sponsored and drove the creation of the first-ever track on global health at the annual BME Supply Chain Conference.

### **5th anniversary of the London Declaration: Merck KGaA, Darmstadt, Germany deepens its commitment in combatting NTDs**

In April 2017, Dr. Belén Garijo, CEO Healthcare, reinforced Merck KGaA, Darmstadt, Germany's commitment to the London Declaration, an unprecedented public-private multi-stakeholder partnership to catalyze momentum in reaching WHO's 2020 Neglected Tropical Disease (NTD) goals to control, eliminate or eradicate 10 NTDs. When the partnership was launched in 2012, Merck KGaA, Darmstadt, Germany pledged up to a tenfold increase in its praziquantel donation to fight schistosomiasis until its elimination. In addition, Dr. Garijo announced that Merck KGaA, Darmstadt, Germany was deepening its commitment to combating NTDs through two new open innovation collaborations with the DNDi NTD Drug Discovery Booster and University of California San Diego (UCSD).

DNDi Drug NTD Discovery Booster aims to accelerate the research process and reduce costs in finding new treatments for NTDs, leishmaniasis and Chagas disease, which 450 million people are at risk of contracting. DNDi is a collaborative, patient-needs-driven, non-profit drug R&D organization for neglected diseases. A collaboration with six other pharmaceutical companies (Eisai, Shionogi, Takeda, AstraZeneca, AbbVie, Celgene), the DNDi NTD Booster experiments with a new open-innovation approach to drug discovery through a multilateral, simultaneous search process across the member companies.

In the collaboration with UCSD, Merck KGaA, Darmstadt, Germany is sharing compounds under the WIPO Re:Search open innovation umbrella, thereby deepening its efforts in the fight against NTDs to identify potential cures for leishmaniasis, Chagas disease and human African trypanosomiasis (HAT). The diseases have a significant impact, with up to 1 million cases of

## Merck KGaA, Darmstadt, Germany 350<sup>th</sup> Anniversary: Staying Curious

On the occasion of its 350-year anniversary, Merck KGaA, Darmstadt, Germany initiated a flagship conference called Curious-Future Insight. The conference brings some of the greatest scientists and most accomplished entrepreneurs together.

The Curious Future Insight conference is a world-renowned event around the future of science & technology and its application to build a better world for humanity. The best minds in science, technology, and entrepreneurship came together to make great things happen and join forces to realize the dreams of a better tomorrow.

At the Curious 2018 conference, more than 35 internationally renowned scientists – including five Nobel Prize laureates – presented their work and discussing the future of science and technology. The speakers presented to an audience of around 1,000 guests from all over the world topics oriented to the main focal areas of the three business sectors (Healthcare “Healthy Lives – new breakthrough therapies and diagnostics”, Life Science “Life Reimagined – synthetic biology and beyond”, and Performance Materials “Materials & Solutions – chemistry and beyond”).

At Curious 2018, Merck KGaA, Darmstadt, Germany launched the Future Insight Prize of up to €1 million annually for the next 35 years. The prize is presented to researchers who will make outstanding contributions to enable innovations important for the future of humanity that address critical global health and access issues in the categories of health, nutrition and energy.

The new award was issued for the first-time in the area of “Pandemic Protector” a visionary dream product enabling an accelerated protection against newly emerging pathogens. The ‘Pandemic Protector’ should make it possible to swiftly analyze emerging pathogens, to generate an agent for disease treatment or prevention, and in doing so protect humanity against the outbreak of a new, global plague.

The Future Insight Prize for the years thereafter will be awarded for the following three topics:

- 2020: Multi-Drug Resistance Breaker - solving the problem of antibacterial resistance to multiple antibacterials (category health)
- 2021: Food Generator – Technology to help feed the world's growing population (category nutrition)
- 2022: CO<sub>2</sub>-to-Fuel Converter – Generating fuel by photocatalytic conversion of atmospheric CO<sub>2</sub> (category energy)

**In summary, we support international efforts to raise the profile and the potential of global health in the development landscape through a cross-sectoral and holistic approach.** We are committed to the UN Sustainable Development Goals. We are also committed to working with partners and stakeholders in helping countries implement the 13<sup>th</sup> WHO General Programme of Work which aims to “promote health, keep the world safe, serve the vulnerable. In addition, we are contributing to the WHO Roadmap for Access (2019-2023) and will work with partners and stakeholders once it is finalized.

## Partnering for Change: Our Partnership Principles

**We believe in transparency.** We publish our Access to Health Charter positions, make potential conflicts of interest known to our partners, and disclose any political contributions or lobbying activities undertaken in developing countries. In our dealings with partners, we commit to avoid practices that hamper healthy competition in developing countries.

**We avoid conflict of interest by applying the Merck KGaA, Darmstadt, Germany Policy on Contributions to Society.** This offers a general framework with respect to definitions, processes and further guidelines on how we appropriately manage our contributions to society and engage with stakeholders. The two main pillars of this framework are Community Involvement (CI) and Engagements with Industry Associations.

**We abide by and support the codes of major pharmaceutical associations to support partnerships aimed at delivering greater patient benefits and supporting higher quality patient care.** These codes include the:

- International Federation of Pharmaceutical Manufacturers and Associations (IFPMA) 2012 Code of Pharmaceutical Marketing Practices
- European Federation of Pharmaceutical Industries and Associations (EFPIA) Code of Practice on Relationships between the Pharmaceutical Industry and Patient Organizations
- EFPIA Disclosure Code 2015
- 2014 Consensus Framework for Ethical Collaboration, the first collaborative platform of five global healthcare organizations (International Alliance of Patients' Organizations (IAPO), International Council of Nurses (ICN), International Federation of Pharmaceutical Manufacturers and Associations (IFPMA), International Pharmaceutical Federation (FIP), and World Medical Association (WMA).

For additional information, please contact: [a2h@emdgroup.com](mailto:a2h@emdgroup.com)

## Glossary / Definitions

Abbreviation	Definition
<b>A2H</b>	Access to Health
<b>ANDI</b>	African Network for Drugs and Diagnostics
<b>BSR</b>	A global nonprofit business network dedicated to sustainability
<b>CEO</b>	Chief Executive Officer
<b>DNDi</b>	Drugs for Neglected Diseases Initiative
<b>EFPIA</b>	European Federation of Pharmaceutical Industries and Associations
<b>EU</b>	European Union
<b>FIP</b>	International Pharmaceutical Federation
<b>GDP</b>	Good Distribution Practices
<b>GMP</b>	Good Manufacturing Practices
<b>GMS</b>	Global Manufacturing & Supply
<b>HAT</b>	Human African trypanosomiasis
<b>HIHDI</b>	High Human Development Country with high inequality (United Nations)
<b>IAPO</b>	International Alliance of Patients' Organizations
<b>ICN</b>	International Council of Nurses
<b>IFPMA</b>	International Federation of Pharmaceutical Manufacturers and Associations
<b>ISG</b>	Interagency Supply Chain Group
<b>LDC</b>	Least Developed Country (United Nations)
<b>LIC</b>	Low-Income Country (World Bank)
<b>LMIC</b>	Lower-Middle-Income Country (World Bank)
<b>MHDC</b>	Medium Human Development Country (United Nations)
<b>NGO</b>	Non-Governmental Organization
<b>NTD</b>	Neglected Tropical Disease(s)
<b>R&amp;D</b>	Research and Development
<b>SDG</b>	UN Sustainable Development Goals
<b>SNO</b>	Supply Network Operations
<b>TDR</b>	Special Programme for Research and Training in Tropical Disease
<b>UN</b>	United Nations
<b>WHO</b>	World Health Organization
<b>WIPO</b>	World Intellectual Property Organization
<b>WMA</b>	World Medical Association

Term	Definition
<b>Developing country</b>	Countries as per the World Bank and United Nations listed in the Annex, often referred to as low- and middle-income countries