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The role of private sector innovations in promoting health literacy and better health took center stage during the BIAC Forum, which was attended by over 200 participants from the public and private sectors.

Over 25 speakers from business, governments, the OECD, patient organizations, and other health experts discussed what needs to be done to attain better health. The main conclusions experts reached throughout the panel revolve around three main areas:

1. There is an urgent need to increase cooperation across sectors and stakeholders in the field
2. Productivity ultimately hinges on healthy workforces and communities
3. Partnerships improving health literacy are vital to increase prevention and curb tide of chronic diseases
KEYNOTE

“Why Well-being Matters for People and Business”

DR. SCOTT RATZAN
Vice President, Global Corporate Affairs, AB InBev and Vice Chair of the BIAC Health Committee

Scott Ratzan, M.D., Vice President, Global Corporate Affairs, AB InBev and Vice Chair of the BIAC Health Committee, has made major contributions to improve public health domestically and internationally. Scott C. Ratzan is a pioneer in the areas of health communication, health literacy and diplomacy. Dr. Ratzan is the Editor-in-Chief of the peer-reviewed Journal of Health Communication: International Perspectives. He also co-chairs the United Nations Secretary General’s Every Woman Every Child Innovation Working Group and serves on the Board of Scientific Counselors, Office of Infectious Diseases, Centers for Disease Control and Prevention. He is a member of the U.S. Institute of Medicine (IOM) Roundtable on Health Literacy, serves on the World Economic Forum Global Agenda Council on Well-Being and Mental Health, and is a former Ambassador for global health research selected by Research!America. He co-authored the definition of health literacy that serves as the basis for U.S. efforts.

Leveraging Health Literacy to Change Behavior

• Health communication holds the key to how we attain better health. Health literacy moves from giving people information and knowledge to providing people with information they can use, obtain, interpret and understand in order to make appropriate health decisions. Great potential comes from new technologies, which are changing the nature of how people obtain and react to information. The United Nations and the European Union increasingly recognize the importance of health literacy, and consequently, there is an opportunity for health stakeholders to design media campaigns and other communication that can change people’s behaviors, social norms, and make a difference.

Multisectoral Partnerships as Action Drivers

• The fight against disease will not be won if actors in the health sector do not work together. We need inclusive partnership between government, private sector, and civil society. There is a role for business to be more than just a donor and become an active collaborator in designing partnerships which drive an “ecosystem change”, which can address complex social problems and induce systems change, particularly as international institutions like the OECD and the United Nations increasingly underscore multi-stakeholder partnerships as a successful way forward.

21st Century Demonstration Projects

• We can build on previous public health longitudinal studies to innovate and tackle pressing health challenges. A new multi-city, multi-sector approach is currently being developed to reduce harmful use of alcohol by 10% in six cities around the world—notably through a 1 billion USD investment in social norms and behavior change campaigns. Another project, the Together for Safer Roads Initiative seeks to reduce road traffic crashes—currently the 8th leading cause of death globally.

A Shift in Healthcare

• Healthy workplaces promote a healthier workforce, which in turn will support healthier products and services—this is where the future of sustainability and productivity lies. Further shifts in the healthcare system show that those who are not in the medical sector can make a difference: we are moving from sick care to health care, from hospital to home care, from the outside world to individuals making decisions.

“We all share one common currency—and that is health.”
Different industry sectors are evolving their product and services portfolios to deliver innovations in nutrition, packaging, and responsible marketing to enable healthier lifestyles. This panel will showcase initiatives in product formulation, responsible marketing, and discuss ways in which businesses are responding to consumer and societal needs. Below are the main messages our speakers shared on this topic:

- Obesity is one of the world’s largest economic burdens. It grows with income and development, and is a regressive condition.
- Education is important to fight obesity. However, it is unlikely—on its own—to change behavior. Information needs to be combined with health literacy.
- A McKinsey Global Institute report on obesity identified 3 “myths” in the literature that it helped dispel: firstly, there is not a “silver bullet” for addressing obesity as a condition; there is a need for a range of interventions to have meaningful impact. Secondly, education is necessary but not sufficient to address obesity. Finally, there is not one single group that has responsibility to address obesity. A multi-stakeholder approach is required.
- We are a consumer-led business. In response to consumer feedback, The Coca-Cola Company has invested in GB almost 30 million pounds to deliver products with reduced sugar content and introduced smaller packs.
- Because the scale of our business, each time we make a change in a product, it has a considerable impact on the calorie and sugar consumption. We have reformulated 27 of our drinks since 2005. As a result, soft drinks is the only food and drink category from which the sugar purchased by British households is decreasing – by 13.6 per cent in the last four years.
- 45% of the company’s sales in the UK are zero sugar options. This is good for business, but also for consumers who see we offer products that fit with their daily lives.
- We have taken action on reformulation and offering smaller pack-sizes over the past few years and will continue to do so. We are also actively encouraging people to switch to drinks with no sugar and no calories. We believe that this will achieve more than a soft drinks tax, and faster, and without putting up the cost of people’s shopping.
PANEL 1
Business Innovation: Meeting Changing Consumers’ & Societal Needs

Through our research, we reformulated more than 7000 per year—amounting to 30-40% of Nestle’s product portfolio. This is part of a commitment to provide healthier choices while retaining the same great taste and avoid the consumer switching to a less nutritional product.

Behavior changes slowly. The consumer is still looking for convenience food, for example ready-to-eat and we need to meet this demand in the healthiest way possible.

Nestle is investing heavily in medical nutrition—currently number 2 globally—which can improve health outcomes for patients living with metabolic disorders, Alzheimer’s, and other diseases.

The regulatory environment must be innovation friendly in the area of nutrition. Facts and an evidence base is still the best way to go to find the best regulations.

Alcohol as such has a role in a healthy life and diet, provided it is consumed in moderation and responsibly. To be sustainable as an industry, we must address the abuse of alcohol. To address this problem effectively, we need a multi-stakeholder approach that coordinates the efforts of industry and civil society.

Consumers are increasingly aware of the consequences of their lifestyle and diet and they like their brands to be active in prevention. We also know brands play a role to make moderation aspirational and influence consumers’ behavior. Heineken spends 10% of its advertising conveying this message in a positive tone of voice - over 210 million views have been gathered over the 2015-16 period.

We also constantly innovate and are producing low and non-alcoholic products, with annual sales of 1.2 billion liters of low and non-alcoholic beers. This is growing about twice the rate as the rate of our other products, which shows that moderation is also good for business.
Healthy workers are the pillars of healthy and productive economies. However, declining activity levels are becoming a worldwide issue and a risk factor to Non Communicable Diseases (NCDs). An increasing number of employers offer wellness programs, which encourage the adoption of healthy lifestyles and behaviours. This panel shared insights on the importance of wellness programs in people’s lives and for society.

Employers offer a great variety of wellness programs that reduce risk factors for disease and encourage healthy lifestyles. Additionally, leading community and academic experts design and engage in wellness programs to improve healthy behaviors. This panel shared insights on how wellness programs can have a positive impact on productivity.

- Physical inactivity has become one of the most serious sources for disease in our society. The Fitness industry led by IHRSA as the Global Fitness & Sports Association has highly qualified people with over 180,000 modern facilities and equipment Globally than can help governments address the Global Physical Inactivity epidemic and reverse the growth in health treatment costs.

- Technology devices can play a role in helping people measure their progress. People need to be motivated and when they start measuring, we need to take them in the right direction by helping them find achievable goals.

- Governments could be more forthcoming regarding how physical activity could be a "proactive investment" in boosting people’s health. The sports industry has engaged in a number of initiatives to increase the number of people doing physical activity, and governments could encourage such initiatives through funding or other types of support.

- There is scientific evidence that supports the success obtained by the wine and spirits industry’s prevention programs that focus on: No drinking and driving, No alcohol use by under-aged individuals, Moderation in use for healthy adults, and Respect for non-drinkers.

- The joint work between government, companies and SAO’s makes prevention programs more effective.

- Not all policy recommendations can be applied in the same way in every country, because they may bring about other unforeseen problems. For example, in Mexico some policies have brought deleterious consequences such as the rise of informal or illicit alcohol.
We recently redeveloped our program for members due to market developments and national policy. Our new workplace wellbeing strategy had three objectives: to create a focal point for government and business to put a focus on workplace wellbeing, drive strong employee engagement, be accessible to all companies and be sustainable, and start a national conversation about workplace wellbeing.

This took the form of a National Workplace Wellbeing Day, where we have also disseminated academic research which demonstrates to employers how these programs provide a return on investment not only from an economic but also from a social perspective.

National Workplace Wellbeing Day is a support for companies who need a catalyst to start a longer term wellbeing program.

WHO defines health as ‘state of complete physical, mental and social well-being and not merely the absence of disease or infirmity’. If we continue to accept this definition then we need to significantly broaden the discussion and action at policy and practice level, and involve employers, schools, communities, the fitness sector, and others who from a health policy perspective are not at the table.

While we will always need to firefight, invest and improve practice in illness management and treatment we are missing out on a major opportunity to improve well-being and increase quality of life by not investing, researching and optimizing opportunity for growing positive health. UNESCO, the United Nations through the SDGs, and other international organizations point to need for increased efforts to provide for and invest in physical activity and lifestyle interventions for all across the lifespan.

We need to shift our perspective on who represents the ‘health workforce’ to reflect the varied professional who operate across an illness wellness continuum, this workforce is not limited to doctors, nurses, physiotherapists and occupational therapists. We could also include physical activity professionals, physical activity specialists, mindfulness practitioners, yoga and pilates teachers. Building health and treating illness need to run in parallel.
DINER KEYNOTE
Engaging in effective partnerships

DEREK YACH
Chief Health Officer,
The Vitality Group Inc

- Private-public partnerships are essential to achieving public health goals. In terms of stepping up investment in employee health, we should not leave health and well-being decisions to Chief Medical Officers and human resources officers to manage as unavoidable costs. Chief Financial Officers, investors and financial analysts should recognize just how material employee health is to corporate financial health.

- Many corporate sectors contribute to either improving or worsening population health. Many leading companies cited as negative contributors are transforming their business plans to improve health and profitability through healthier core products and services.

- We need government actions that steer and support companies to transform while designing regulatory framework proportionate to health risks they seek to reduce.

- We need significant investment in technological innovations across the fields of biotechnology, information technology, and others. Such investment will create opportunities to transform entire business sectors in ways that will benefit health and the environment.

- We need better metrics to help investors, asset managers, consumer groups, and the media independently assess whether companies’ claims of transformation are real. The best way to tackle public deficit of trust regarding industry is to provide verifiable data that demonstrates progress around claimed goals and actions.
KEYNOTE
Winning the Fight Against Disease

SURESH KUMAR
Member of the Executive Committee and Executive Vice President, External affairs at Sanofi

Suresh Kumar is a member of Sanofi’s Executive Committee and Executive Vice President, External Affairs. He leads stakeholder engagements with governments and multilateral organizations, and initiatives to enhance patient access to Sanofi’s medicines and vaccines. Suresh is also responsible for Sanofi’s Market Access, Communications and Corporate Social Responsibility.

Prior to joining Sanofi, Suresh led the Public Sector practice at Oliver Wyman where he was also a partner in the Health & Life Sciences team. He previously served as US Assistant Secretary of Commerce & Director General of the US & Foreign Commercial Service (USFCS) in the Obama administration.

• Healthcare is at a crossroads, and recent discussions on healthcare have pitted one group against another. To solve challenges in healthcare, stakeholders need a common ground to fight against disease and improve patient health. Population wellbeing has improved and people are living longer, better, and need to be cared for. Budgets are strained, and health cannot be compromised as it impacts productivity and growth of a country.

• Governments must budget appropriately to care for their populations. Health expenditure as share of GDP in OECD countries is 6.5% on average from public sector and 2.4% from private sector. We should look at all components of the healthcare system to manage costs. We should look at prevention and education as the first resort, medicine being intermediate resort and expensive hospital procedures such as surgeries as the last resort.

• We need to decide about the appropriate amount that needs to be spent in the health sector. However, there is not one universal answer: one price-fits-all does not work. Budgets depend on the size of the economy, the population and should adjust for cost of living across country.

• To move forward we must address pricing. Payers have the right to ask and we have an obligation to demonstrate for any new medicine that its value exceeds its costs, and this must be done when the product is launched through health economics outcomes research. We currently have too many headlines that scare. To do more with less, or care for more people, longer and at lower costs maybe an aspiration but it is not very realistic near term and it will not be realistic at all unless we put policies in place that encourage innovation, influence and allow the use of technology and allow industry to invest in R&D, develop innovative programs and pay for mistakes and experimentation. Policies must encourage innovation to reduce our burden of disease and over time Healthcare costs.

• Industry must not be on the sidelines, but have a seat at the table in health policy discussions. Better policy outcomes drive better patient outcomes.

"Healthy people are at the heart of healthy economies"
Increasing cooperation with the private sector and promoting inter-agency government coordination are two recurring themes the panel experts identified as key to the healthcare systems of tomorrow.

This panel discussed how stakeholders can cooperate and use key technologies to improve patient health outcomes and maintain financial sustainability of healthcare systems. Speakers discussed some of global health’s most pressing challenges, including Alzheimer’s disease, the need to reduce inefficiency by tackling waste, and the importance of inter-government agency and stakeholder dialogue.

- Private sector innovation can bring benefits and opportunities that will make societies healthier and economies more productive. Private sector contributes positively to improving health and well-being.

- Integrated Care is one of the most promising strategies available to overcome the challenge of increasing demand and more complex cases, and for care providers to pursue a more holistic approach to keeping their population healthy, better managing chronic diseases and thereby minimizing costly health escalations. A lot of initiatives are taking place already (Integrated Care Alliance – EC EIP-AHA).

- There is a need to transition from existing fragmented health and social care models towards holistic, people-centric, coordinated care. Such transition requires political leadership, sustained investment and a long-term vision. Effective solutions demand a joint, concerted effort across various stakeholders with models of care that specifically address the increasing burden of chronic diseases and related co-morbidities.

- The biggest opportunity in healthcare right now is to improve care and reduce inefficiency by tackling waste. According to an OECD study, Healthcare is the least efficient sector in terms of the quantity of input relative to the output.

- In order to trigger change at scale, we need an alignment of incentives, and connections between different parts of the healthcare systems. This way we will be able to address waste issues.
• In Sweden, our experience shows that people live longer lives but sick years are also longer. If one succeeds with prevention, people will live longer but with diseases, and consequently will need more healthcare in later years. Policymakers need to take this aspect into consideration.

• In healthcare, our focus should be on saving lives, not on cost-containment.

• To be efficient, we need to make patients be their own doctors.

• In Sweden, we brought all health stakeholders to the table and agreed on: digitalization to make healthcare more efficient, we changed the reimbursement system to incentivize innovation, and we try to align the merit system between private industry and universities.

• Dementia is truly a global disease, 48.5 million people are estimated to have dementia, growing to an estimated 131.5 million people by 2050. Families and friends of people affected by dementia often carry the burden of the disease by caring for many years. Dementia is an expensive disease that cost an estimated US$ 818 Billion in 2015 – or 1% of global GDP. There is no cure yet and more funding is needed for research.

• Unfortunately, most healthcare systems are ill-suited to address it. We need governments to take dementia seriously.

• We need broad stakeholder cooperation, including work with industry to find solutions against dementia.
Access to new technologies has the potential to significantly reduce disease burden for chronic diseases. This panel discussed the multi-stakeholder solutions, including payment and funding schemes, which can improve access and promote innovation.

- To improve patients’ health and access to worthwhile care, we need to tackle waste in health systems – the OECD is currently preparing a major publication on the topic.
- We need to develop improved metrics to assess the value of health care, moving from indicators of life expectancy to more gradual measures of health and health system performance, from only measures of input and processes, to measures that also reflect patient experience and outcomes such as pain, quality of life, and ability to function and be independent.
- In the area of regulatory processes, there is growing pressure for quicker access to innovations that show promise. But this needs to come with more efforts to collect real world evidence to assess whether these innovations deliver on their promise, as well as efforts to get rid of innovations that do not deliver added value.
- How can we assess what is truly innovative and how valuable it is? In Europe both industry and governments have a process of bringing together the payers and the health technology assessors close to the regulators, so we have one aligned view on how we should develop medicines. In Europe we also have a developing cooperation on Relative Effectiveness Assessments which will support health technology assessments done at national level.
- The pricing debate as it is often reported in the media does not reflect the type of constructive dialogue that is currently taking place among patient groups, industry, and governments.
- We need to work better with existing tools to find a way to manage the introduction of forthcoming innovations.
• We need coordination to tackle the four common risk factors as identified by WHO: physical inactivity, tobacco use, unhealthy diet, harmful use of alcohol and what we at the World Heart Federation describe as the fifth risk factor – lack of political prioritisation of CVD and other noncommunicable diseases as an urgent crisis that has largely shifted to low- and middle-income countries.

• We recognize that policies are also not enough, and that we need to work in innovative ways across sectors and disciplines through partnerships with common goals. And within government, there needs to be a broader set of stakeholders besides health, to include trade, finance, agriculture, other government agencies.

• We also need to both support and sometimes challenge international organizations including WHO and the UN.

• When it comes to payment reforms we should look at spending per capita to address chronic diseases.

• In the US we have a system that pays for things once they are cured instead of having a much more proactive system of social services, prevention services, population-based services, and public health services, in addition to a more traditional medical care financing service.
The innovation ecosystem is changing, and finding ways to address current and future global health challenges. This concluding panel explored how to achieve a broader policy framework that enables multiple stakeholders to achieve better patient and health outcomes.

- Health innovation is different from other types of innovations as there are ethical considerations in health to take into account. Considering the regulations in place, one cannot just experiment as one can in other areas, which makes innovation very expensive.

- Policy has a direct impact on the cost of innovation. International organizations have a crucial role in harmonizing systems and how to value innovation to name a few areas of impact.

- We have yet to see a better alignment of policies across different fields. It is challenging to bring policies together at a national level, including finance, health, and innovation, among others. This is a big policy challenge for OECD countries.

- Focusing on some specific issues at the OECD, in the area of Alzheimer and dementia, we had the UK bringing this issue to the G8 as an important policy priority. The resulting dialogue has led to more cooperation between patient groups, the business community, academia and different parts of governments. There is not yet enough research conducted in the area, although investment in the relevant science is now growing in several countries around the world.

- Innovation is not limited to medicines, it is also about innovation in health care and new technologies and about wellbeing in a broader context.
Dr. Bernard Prigent  
Head of Medical Affairs  
Europe, Pfizer Inc.

- We urgently need to identify more effective ways to ensure systematic patient involvement within the innovation ecosystem.
- Policies can shape behavior and have a tremendous impact on innovation. It has a critical impact on incentive in R&D. In brief, policy is an enabler.
- International research cooperation combined with multi-sectorial collaboration is crucial to enhance innovation and to win the fight against diseases.

Dr. Carrie Wolinetz  
Director, Office for Science Policy, National Institutes of Health

- NIH fosters collaboration through three unique aspects:
  1. funding,
  2. relationships its sister agencies on the regulatory side,
  3. tangible ways to be able to transform and innovate how research is conducted.
- NIH plays a leading role in bringing forward public-private partnerships, intergovernmental partnerships, and other collaborations which allows governments to make the right policy decisions based on evidence.
- The future of innovation is not just about the science itself, but about the ways we approach the science, including transforming the way we think about research participants: not as human subjects but as full partners in the design, conduct, and outcomes of the research.
On behalf of BIAC, Mr. Karami-Ruiz thanked participants, speakers, and the moderator for their engagement and the breadth of topics and industry initiatives covered during the Forum. Special recognition was given to the companies who supported the event. He summarized the three main overarching themes identified by speakers throughout the event: the need for closer cooperation and dialogue across stakeholders and government agencies to accelerate innovation, recognizing healthy populations are strong pillars for economic growth and sustainability, and the power of health literacy initiatives to improve health outcomes across populations. Finally, he emphasized the importance of health and well-being for the OECD and BIAC competitiveness agenda.

**ABOUT THE MODERATOR**

Riz Khan is an international journalist, author, and public speaker recognized across the globe for having hosted flagship TV shows on CNN International and Al Jazeera English – of which he was a Founding Director. Prior to that Riz had training at, and an extensive career with, the BBC as a correspondent and founding presenter of BBC World (he co-presented the launch show of BBC World Service TV News in November 1991).

Beyond fronting news and current affairs programming – as well as reporting of major, live global events while at CNN International – he launched the first, global, live interactive talk show, Q&A with Riz Khan, an award-winning, daily program giving viewers around the world the chance to directly question a wide range of high-profile newsmakers and celebrities. His guest list included a genuinely global who’s-who of leading figures, from then-UN Secretary General Ko Annan, former US Presidents Jimmy Carter and Bill Clinton, the Dalai Lama, and Nelson Mandela... to people in music, literature, and the arts such as, Peter Gabriel, Annie Lennox, Youssou N’Dour, Paulo Coelho, Anne Rice, and Margaret Atwood, among many others.
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BIAC Forum on Innovation in Health & Well-being

3-4 MAY 2016—PARIS, FRANCE—OECD HEADQUARTERS

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