



## **HEALTHCARE EQUITY: IS IT FAIR?**

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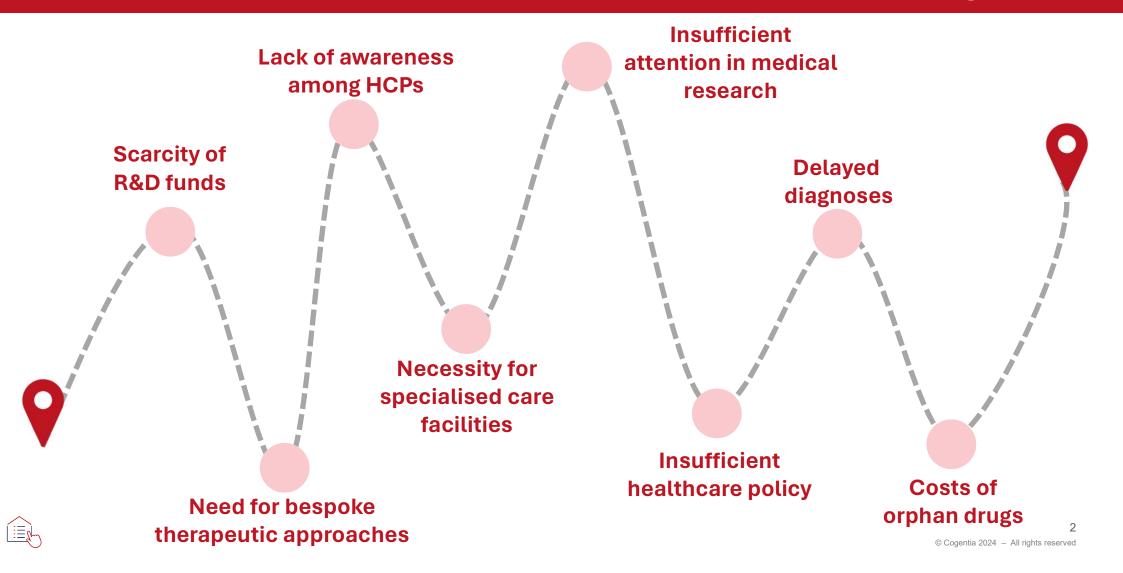
#### WHAT IS HEALTHCARE EQUITY?



"Equity is the absence of unfair, avoidable or remediable differences among groups of people, whether those groups are defined socially, economically, demographically, or geographically or by other dimensions of inequality (e.g. sex, gender, ethnicity, disability, or sexual orientation)."

## THE JOURNEY TOWARDS HEALTHCARE EQUITY FOR RARE DISEASES

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#### GLOBAL DISPARITIES IN HEALTHCARE EQUITY

Children in sub-Saharan Africa

14x

more likely to die

87%

of premature deaths in low- and middle-income countries

**Developing countries account for** 

99%

of annual maternal deaths in the world

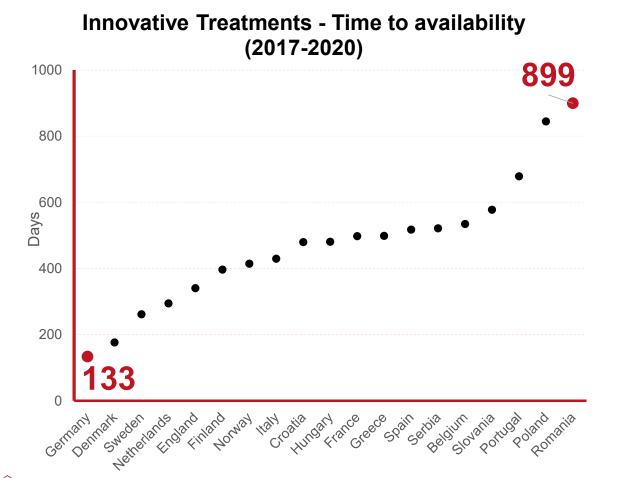
Life expectancy varies by

34 years



#### REGIONAL DISPARITIES IN EUROPE

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Complex regulatory environments



**Budget constraints** 



**Policy influence** 



Manufacturing and supply chain issues



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#### LOCAL DISPARITIES IN THE US

Disparities in health coverage

89% vs. 93%

African Americans vs. white Americans Access to healthcare 12%

% of African Americans under the age of 65 with no healthcare coverage at all

Health implications

7% vs. 4%

African Americans vs. white Americans Stroke occurring in the 50-64 aged years

32% vs. 22%

African Americans vs. white Americans High blood pressure in the 35-49 aged years



#### POTENTIAL BARRIERS

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Regulatory hurdles

The intricacy of approval processes



Discrepancies in regulatory requirements across countries



The limited availability of clinical trials for underserved



Economic & logistical challenges

Securing adequate funding remains a challenge



The complexity of medicine distribution



The high cost of certain therapies



Cultural and social obstacles

Lack of cultural competence in healthcare



Stigma associated with certain diseases



Language barriers and health literacy



#### **INITIATIVES & PHARMA'S ROLE IN HEALTHCARE EQUITY**

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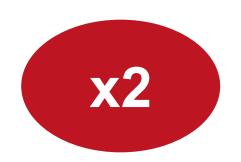


## INITIATIVES & PHARMA'S ROLE IN HEALTHCARE EQUITY BMS'S 'STANDING IN THE GAAP'



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Situation to address



Twice as likely to develop MM compared to White Americans



20% of MM cases, despite comprising 13.4% of the US pop.



37% less likely to have a stem cell transplant vs White Americans.

Key objectives and actions

Increase awareness about the unique impact of MM on African Americans

Support patient education on standards of care and support services

Provide healthcare professionals with educational programs



#### **INITIATIVES & PHARMA'S ROLE IN HEALTHCARE EQUITY** BMS'S 'STANDING IN THE GAAP' - ACHIEVEMENTS





20+ different educational materials produced (e.g. clinical trial brochure to address disparities and myths, distributed to over 60 clinical trial sites in the U.S)



Supported over 40 speaker programs with nearly 2,000 healthcare professional attendees



First Facebook page dedicated to African Americans affected by MM with over 61,000 followers



Increased awareness and detection rates of MM among African Americans



## 'TOWARDS A FUTURE OF HEALTHCARE EQUITY' – WHAT CAN PHARMA COMPANIES DO TO MITIGATE DISPARITIES IN RARE DISEASES?

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1

**Process Awareness** 

Develop an awareness of current and upcoming processes which could potentially benefit healthcare equity

European Joint Clinical Assessment (JCA)

2

Market Access
Strategy

Ensure integration of equity into your market access strategy

Equity Roles within Market Access
Teams

3

**Tailored Solutions** 

Recognise that rare diseases require nuanced and tailored solutions

NICE National Institute for Health and Care Excellence

Distributional Cost-Effectiveness
Analysis in Haematology



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ABBEY Child

Senior Consultant

Come and meet us at EPA Stand No. 146

# Our Advanced Therapeutics White Papers:







**Stem Cell Therapies**