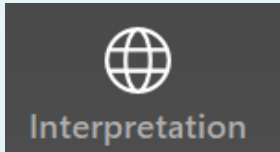




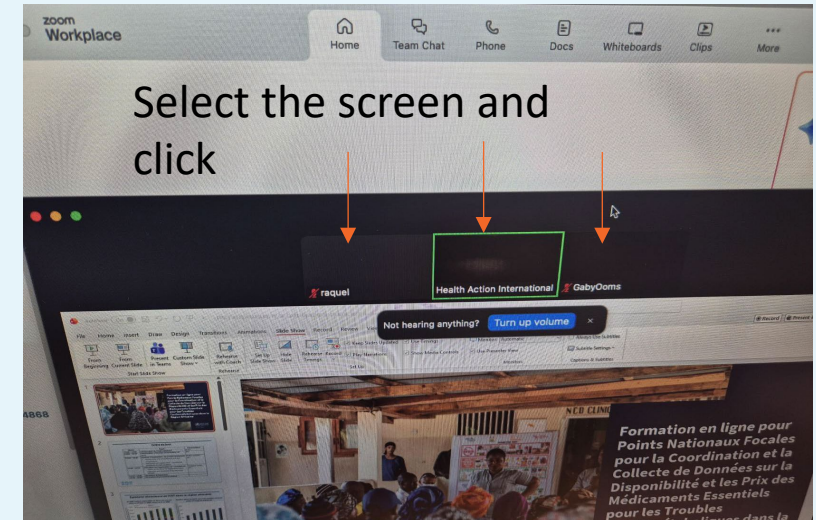
# Online Training for National Focal Points for the Coordination and Collection of Data on the Availability and Prices of Essential Medicines for Cardiometabolic Conditions in the African Region

# Housekeeping



This meeting will be held in English with AI-powered interpretation into French and Portuguese.

To select your preferred language, please click on the interpretation button at the bottom of the screen.



The slides presented are also available in three languages – English, French and Portuguese

To select slides in the language you prefer, you can switch between the multiple shared screens, which can be seen at the top of the page. (You may need to move your mouse for user names to appear.)

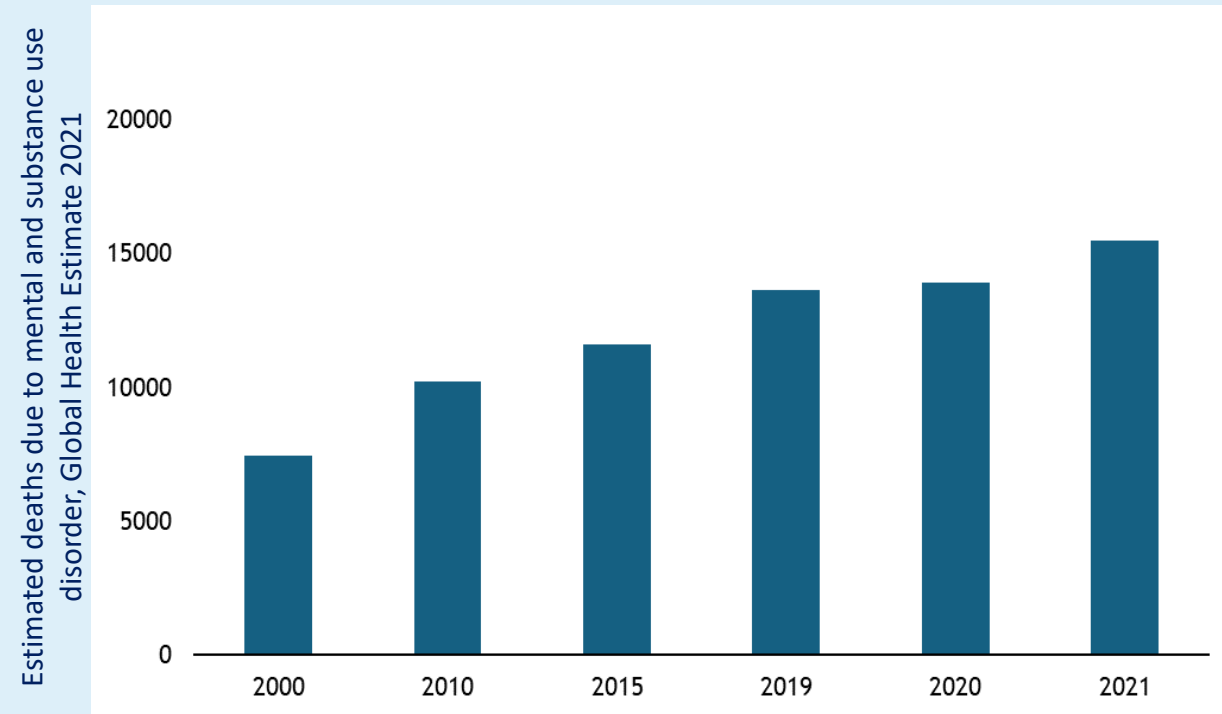
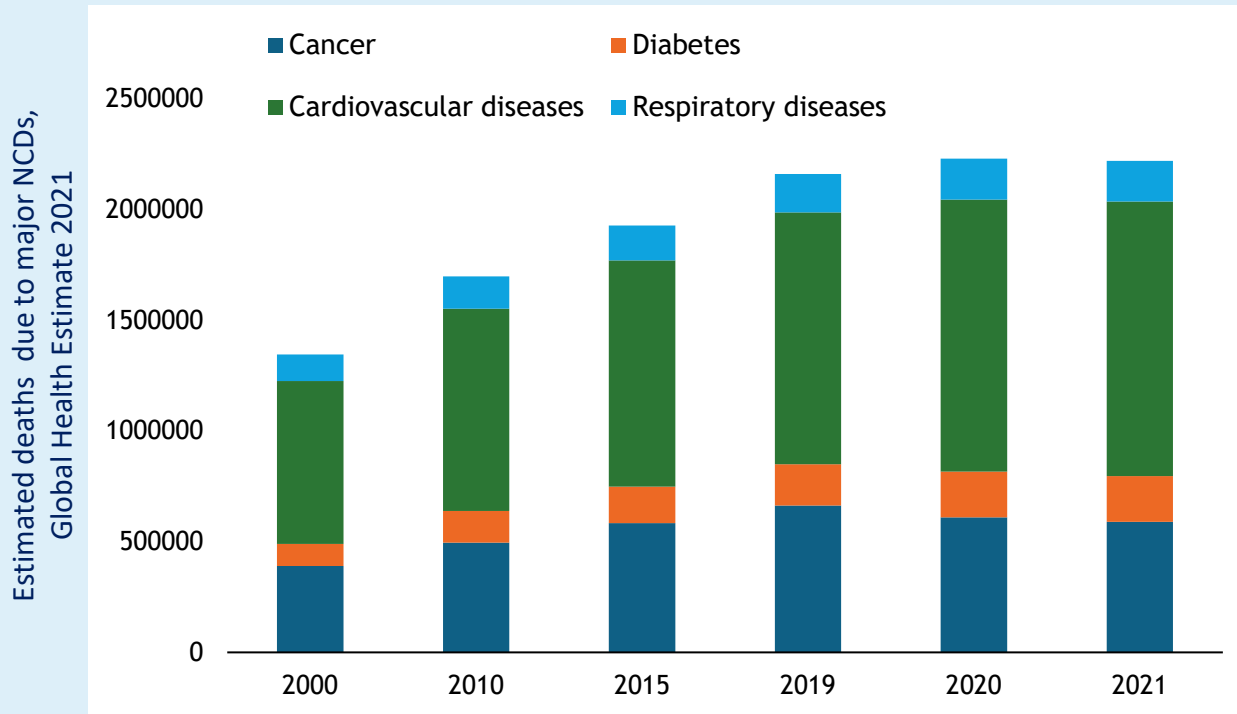
# Agenda

Time	Theme	Presenter
13:00 – 13:05	<b>Project Introduction, Purpose</b>	WHO
13:05 – 13:10	<b>Introduction to the Monitoring Training Team</b>	HAI
13:10 – 13:35	<b>Conducting the Assessment: What Is Needed</b> Introduction to monitoring and its components Using the app – Practice questions and setup	Molly Lepeska , HAI
13:35 – 14:10	<b>Use of the Monitoring App</b> Running the application, answering frequently asked questions	Margaret Ewen , HAI
14:10 – 14:25	<b>Q&amp;A</b>	
14:25 – 14:30	<b>Closure and next steps</b>	

# Silent NCD epidemic in the African Region

NCDs accounted for 35.4% of all deaths in Africa in 2021, up from 21% in 2000

Estimated number of deaths due to mental and substance use disorders



NCDs are set to overtake communicable, maternal, neonatal and nutritional diseases combined as the leading cause of death by 2030

# Major Global NCD drivers of mortality



Most Deadly Diseases	
<b>Cancer</b> <sup>(3)</sup>	<b>9.7 Million</b>
Heart disease <sup>(1)</sup>	19.2 Million
Hypertension <sup>(1)</sup>	1.4 Million
Stroke <sup>(1)</sup>	7.0 Million
Diabetes <sup>(2)</sup>	3.4 Million
<b>Total Cardiometabolic</b>	<b>31.0 Million</b>

**319%** more fatal than cancer

**Source:**

- (1) Global Health Estimate
- (2) International Diabetes Federation
- (3) Global Cancer Observatory

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# Preliminary results on a systematized scoping review:

## Availability, accessibility, and affordability of essential medicines and technologies for cardiovascular disease and diabetes in the WHO African Region

- **Scope:** Review synthesizes findings from 33 studies (2013–2025) across 23 countries.
- **Persistent Gaps:**
  - **Availability:** Many essential medicines for cardiovascular disease and diabetes remain below the WHO target of 80% availability, especially in public sector facilities.
  - **Affordability:** Most essential medicines cost more than a day's wage for the lowest-paid workers; affordability is a major barrier to access.
  - **Accessibility:** Stockouts, supply chain issues, and disparities between urban/rural and public/private sectors persist.
- **COVID-19 Impact:** The pandemic worsened stockouts and reduced medicine availability.
- **Successes:** Decentralization, community-based care, and public-private partnerships have improved access in some settings.
- **Recommendations:**
  - Country-specific strategies to strengthen supply chains, align policies, and improve affordability.
  - Expand partnerships and financial support mechanisms.
  - Advance universal health coverage to reduce NCD burden.

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# Background of the Regional Assessment

- The WHO Regional Office for Africa is conducting a regional assessment on the availability and prices of essential medicines, diagnostics, and technologies for cardiometabolic conditions—specifically type 1 and 2 diabetes and cardiovascular diseases such as hypertension, myocardial infarction, cardiovascular episodes, and atherosclerotic cardiovascular disease—in the WHO African Region.
- The objective is to identify barriers and inform targeted interventions to improve availability, affordability, and equitable access.
- The assessment includes three key components:
  - **Pillar 1:** Facility-level surveys using an app-based tool to collect data on price and availability in public and private health facilities.
  - **Pillar 2:** Procurement analysis to gather contextual information on health systems and national procurement prices.
  - **Pillar 3:** Price component tracking to examine the breakdown of medicine costs across the supply chain.

**Together, these elements will provide a comprehensive understanding of both facility-level access and systemic bottlenecks affecting supply and policy.**

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## Purpose of this online training

- Provide an outline of tools that will be used to gather evidence around Pillar 1 (facilities-based surveys) and Pillar 2 (national health system and procurement prices) to improve access to key NCD medicines
- Provide further details on how to complete the Pillar 2 survey
- Explain the facility-based survey app and provide an overview the survey process for Pillar 1
- Provide resources to support Focal Point going forward

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## **Pillar 2: Procurement analysis to gather contextual information on health systems and national procurement prices**

# Pillar 2. Procurement analysis to gather contextual information on health systems and national procurement prices.

0% Completed

Fields Completed 0 / 5



## Information on health systems and national procurement prices related to cardiometabolic medicines, diagnostics, and technologies

Homepage | Information on Respondents | Section A. 1: Public health infrastructure | Section A.2: Policies, strategies, action plans | Section A.3: Health information systems | Section A.4: Capacity for diagnosis, treatment and care | Section A.5: Availability and prices of medicines | Section B: Procurement Prices | Submit Page

English (US)

### Background

The WHO Regional Office for Africa is conducting a regional assessment on the availability and prices of essential medicines, diagnostics, and technologies for cardiometabolic conditions—specifically type 1 and 2 diabetes and cardiovascular diseases such as hypertension, myocardial infarction, cardiovascular episodes, and atherosclerotic cardiovascular disease—in the WHO African Region. The objective is to identify barriers and inform targeted interventions to improve availability, affordability, and equitable access.

The assessment includes three key components:

1. Facility-level surveys using an app-based tool to collect data on price and availability in public and private health facilities.
2. Procurement analysis to gather contextual information on health systems and national procurement prices.
3. Price component tracking to examine the breakdown of medicine costs across the supply chain.

Together, these elements will provide a comprehensive understanding of both facility-level access and systemic bottlenecks affecting supply and policy.

### Purpose

This online survey focuses on **Component 2: Procurement analysis**. It aims to gather information on health system policies and practices, and national procurement prices related to cardiometabolic medicines, diagnostics, and technologies. The goal is to better understand each country's capacity to ensure access to essential resources for managing cardiometabolic conditions.

The survey has two parts:

- Part A: Health System Questions – covering policies and procedures that support access to essential resources for managing cardiometabolic conditions.
- Part B: Government Procurement – focusing on pricing and procurement of relevant medicines and technologies.

You can navigate these parts in the tabs above.



- Section A. 1: Public health infrastructure
- Section A.2: Policies, strategies, action plans
- Section A.3: Health information systems
- Section A.4: Capacity for diagnosis, treatment and care
- Section A.5: Availability and prices of medicines
- Section B: Procurement Prices

<https://form.jotform.com/253085048260050>

# Pillar 2. Procurement analysis to gather contextual information on health systems and national procurement prices.

Focal Point Name and Title

<input type="text"/>	<input type="text"/>
<small>Full Name</small>	<small>Affiliation and Title (e.g. NCD manager, Ministry of Health)</small>
<input type="text"/>	<input type="text"/>
<small>Email</small>	<small>Sections you completed (e.g. Part A.1; A.3.3)</small>
<input type="text"/>	<input type="text"/>

example@example.com

## Additional Support Contacts

**INSTRUCTIONS FOR ADDITIONAL CONTACTS-** - Please fill out the sections that you have been assigned on this page by your Lead Focal Point. When you are done with your sections, click "Submit" on the final page you have completed. Your Lead Focal Point will then receive an email that your section has been completed and may follow up with additional information.

Contact information of others completing the survey *	Name	Affiliation and title	Contact Information	Sections worked on
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

[+ ADD ADDITIONAL CONTACT](#)

Click "next" to begin the survey.

Please note that while there is space to indicate "Don't know" for most questions, there should be very few of these. If someone is filling in numerous "Don't knows", another person who is more aware of this information should be found to complete this section.

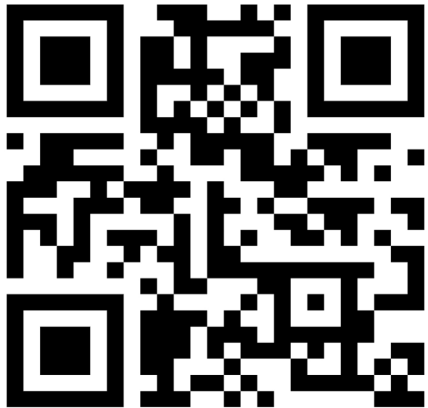
In order to validate responses, documentation will be requested for affirmative responses throughout the questionnaire. Please make every effort to provide electronic copies of the requested documentation, or provide online links.

[Back](#) [Contact Information Complete - Send to my Inbox](#) [Next](#)

## INSTRUCTIONS

- We have designed this survey so that multiple people can work off one document, which you, as the Lead Focal Point, will manage.
- Please review all sections and determine which of your colleagues can support you in providing this information.
- Once you have pressed the "Contact Information Complete" button you will receive email version of the survey in the inbox of the email you provided.
- You can then forward this version of the survey to others listed as "additional support contacts" so that they can complete their sections of the survey and you can monitor their input.
- When all of the sections are complete you must hit **"submit final survey"** on the last page.

## **Pillar 2. Procurement analysis to gather contextual information on health systems and national procurement prices.**



### **Next Steps:**

Download Survey

Begin Survey completion

Questions? [Molly@haiweb.org](mailto:Molly@haiweb.org)

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# **Pillar 1: Facility-level surveys using an app-based tool to collect data on price and availability in public and private health facilities.**



# **PILLAR 1**

**This training focuses on 1: Facility-level surveys. Those interested in also carrying out price component training, please contact us**

# PRICE AND AVAILABILITY OF CARDIOMETABOLIC MEDICINES SURVEY APP

WHO-AFRO

2025



# OVERVIEW OF TOOL

Data collected from:



- Facilities data collected by phone or in-person
- Entered into app (on phone or webpage)
- Automated analyses in dashboards

Training will focus on questions that need more explanation

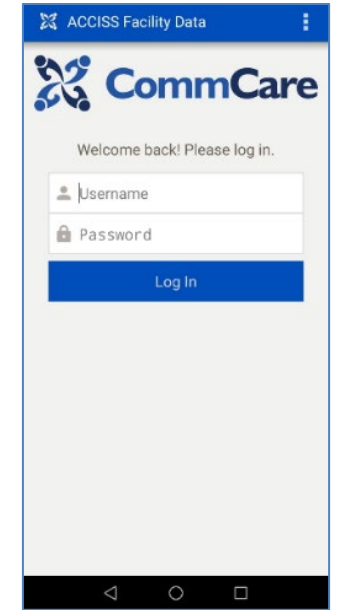
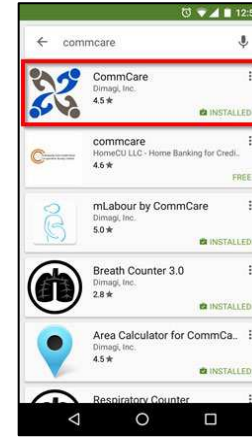
# GETTING STARTED: LOGGING ON

Prior to training you will already have:

- User guide for the app
- Unique username and password

Username whotest

Password: testingapp



## IF YOU HAVE DOWNLOADED THE APP

Please use this code: **3MJ4Qmd**

Username whotest

Password: testingapp

## IF YOU ARE USING THE WEB APP



# GETTING STARTED: Recruitment

Most of this information is in the training manual.

*Some notes on building your facilities recruitment list*

The ideal number of facilities is 5 per sector per survey region.

- If 2 sectors (public and private pharmacies) and 6 regions are surveyed, then the minimum is 30 public facilities and 30 private pharmacies.
- The first step in recruiting the facilities is to identify those that will be invited to participate.
  - Start with a list of public sector facilities, in each level of care you will be monitoring (regional/referral hospitals, district hospitals, primary healthcare clinics etc.), in each region selected for monitoring. Include those that have diabetes clinics. Note: only select levels of care that are permitted to dispense insulin.
  - For private pharmacies in the community, cross-check the list with other focal points in the study's regions.

# GETTING STARTED: Recruitment

- It is important that you have a **telephone number** for each facility. If you are unable to get the phone number, then exclude the facility from the list.
  - If it is a hospital that has a diabetes clinic then a personal visit is needed to invite participation. Repeat this process for each of the other sectors you have selected for monitoring (such as private retail pharmacies).
- Once the list of potential facilities per sector and per region has been drafted, stratify as urban or rural (if relevant). Then randomly select facilities from each of these two groups in each survey region, according to the proportion of the population they represent.
  - If identifying the facilities as urban or rural is not possible, simply do a random selection. In the public sector, randomly select by the levels of care that will be monitored.

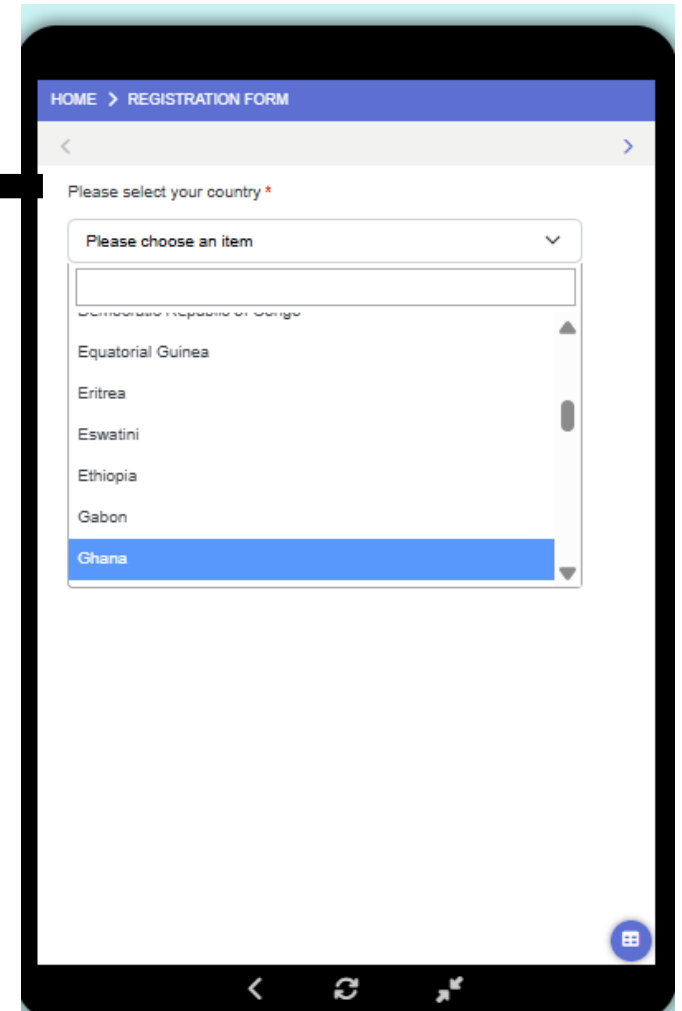
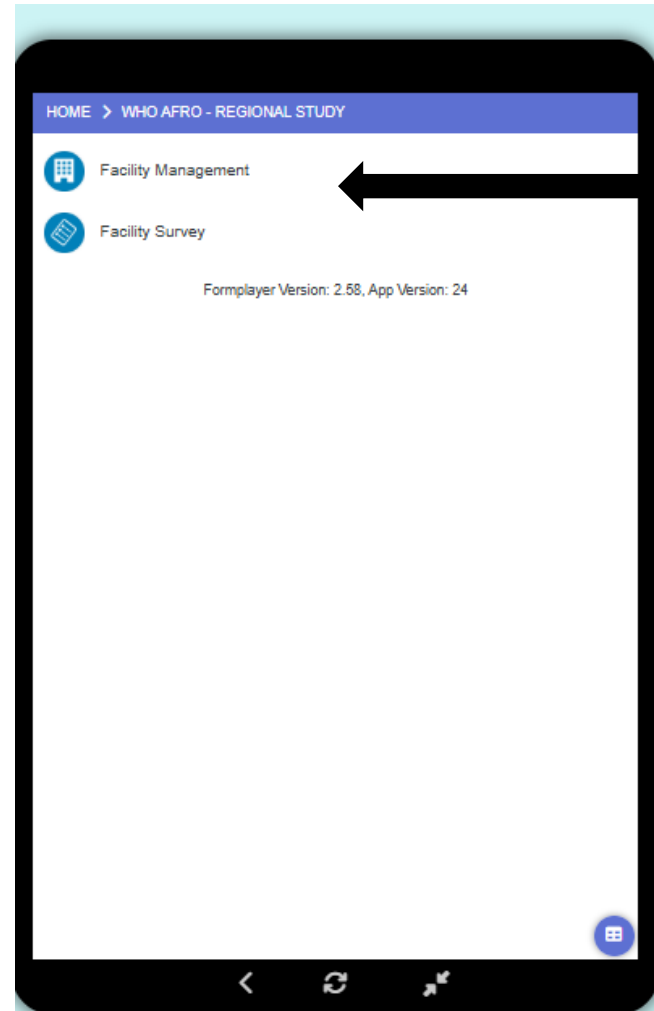
The outcome of the stratification and randomisation is a master list of potential facilities which is the basis for recruitment.

# REGISTERING YOUR FACILITY



Start menu - where the facilities get registered ('Facility Management') and the data on availability, prices etc. gets entered ('Facility Survey').

Facilities have been recruited and their location, details etc. have been entered



# REGISTERING YOUR FACILITY

HOME > REGISTRATION FORM

Date of Registration \*

M/D/YYYY

Name of Health Facility \*

Climb Pharmacy

User ID \*

Distinct numeric value given to data collector

Facility Number \*

Consecutive number of form's filled out from the data collector (For instance, if this is the third facility surveyed, the number '3' should be entered)

Facility ID: -

Region \*

Please refer to your region list to ensure you region number matches the location of your facility

Please choose an item

HOME > REGISTRATION FORM

Contact Person \*

Telephone Number \*

Alternative Telephone Number

Facility Address:

Street Number \*

Enter -999 if not applicable or unknown

Street Name \*

Enter -999 if not applicable or unknown

HOME > REGISTRATION FORM

Facility Sector \*

Please choose an item

- Public Hospital or Health Center
- Private Pharmacy
- NGO, Mission Hospital, or Faith-based Institution
- Private Hospital or Clinic
- Other

# FACILITY SURVEY

Start menu - where the facilities get registered ('Facility Management') and the data on availability, prices etc. gets entered ('Facility Survey').

Facilities have been recruited and their location, details etc. have been entered

Start the interview by clicking on '**Facilities Survey**' and select the facility name



FACILITY NAME	FACILITY ID
Joe's Pharmacy	2-1
Northhill Health Center	1-1
Boston Medical Center	2-2
CVS Pharmacy	1-2
Sunrise Convenience	2-3

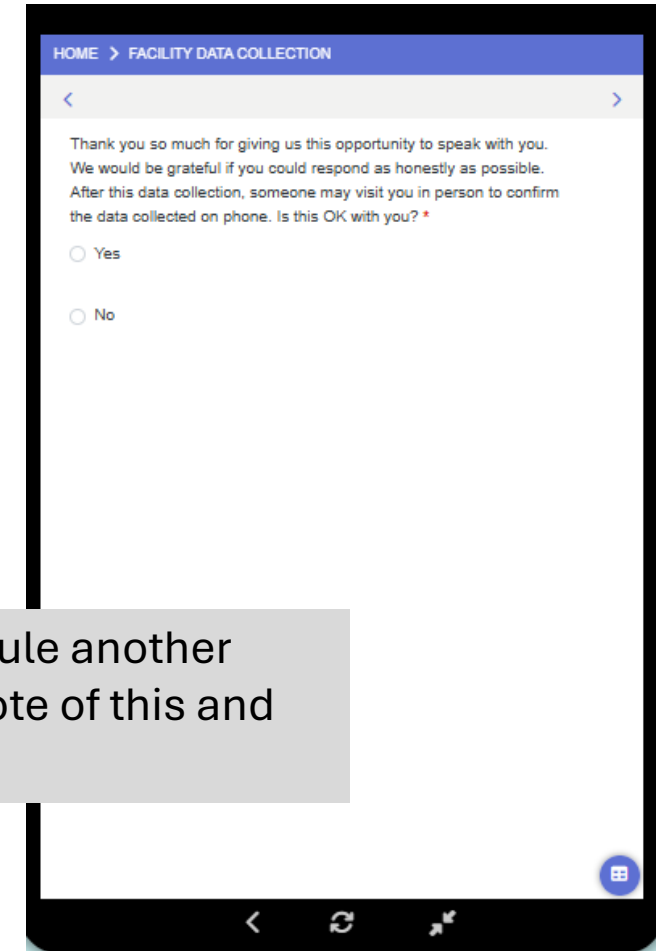
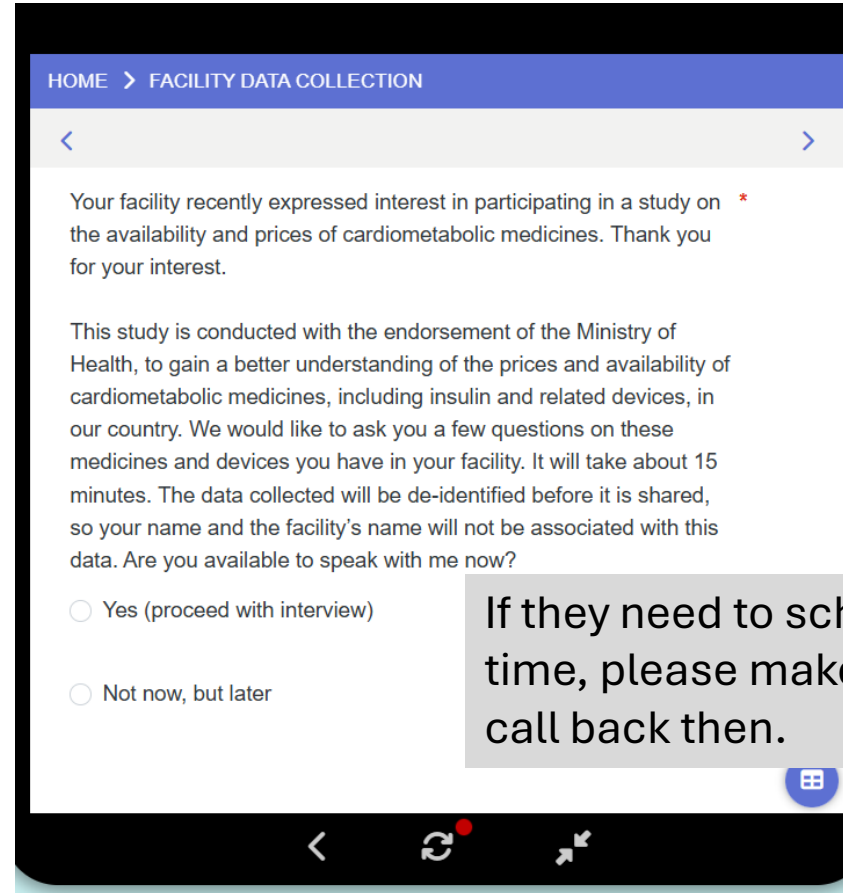
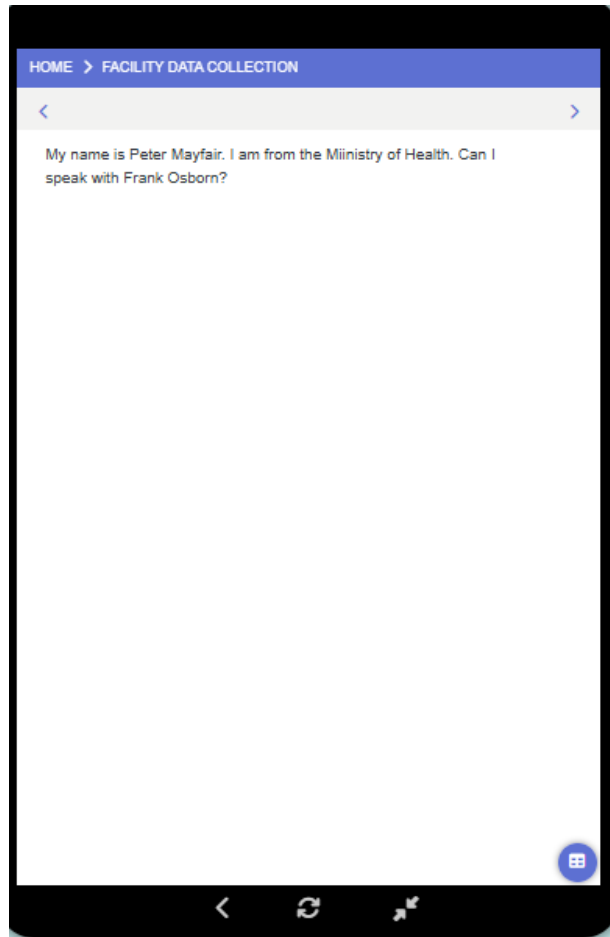
Check:

- the person you are talking to is in the facility you have selected
- Sector
- Level of care

Case Detail	
CASE SUMMARY	CONTACT DETAILS
Facility Name	Northhill Health Center
Facility ID	1-1
Last Modified	20/08/19
Region	3

Case Detail	
CASE SUMMARY	CONTACT DETAILS
Contact Person	Michelle
Address	100 Northcourt Circle, Boston, MA
Telephone Number	6175754854
Alternative	6175835837

# FACILITY SURVEY: Introductory Information



# **FACILITY SURVEY:** Cardiovascular medicines

**Cardiovascular disease**, such as hypertension, myocardial infarction, cardiovascular episodes, and atherosclerotic cardiovascular disease

Questions will be asked for each of the following medicine categories. Please select which **medicines and strength** you will survey per category **ahead** of carrying out the survey. There will also be an option to fill in additional medicine types and strengths if the medicine on your EML or most commonly used is not listed. Questions will be repeated based on what is selected.

**ACE inhibitors** – lisinopril, ramipril, perindopril, enalapril, captopril

**Anti HT combinations:** lisonipril+amlodipine, lisonipril+hydrochlorothiazide, perindopril+amlodipine+indapamide, telmisartan+amlodipine, telmisartan+ hydrochlorothiazide, valsartan+amlodipine+hydrochlorothiazide

**Angiotensin receptor blockers** – losartan, telmisartan, valsartan

**CCBs** – nifedipine retard, amlodipine, nicardipine

**Diuretics** – hydrochlorothiazide, chlorothiazide, chlorthalidone, indapamide, torsemide

**Antiplatelet** - aspirin, clopidogrel

**Statins** simvastatin, atorvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin

**Beta blockers** – atenolol, metoprolol, bisoprolol, carvedilol

**Vasodilators-** hydralazine


**Blood pressure machine** (Validated BP machine/Validated digital BP monitors) – indicating which cuff size availability included

# FACILITY SURVEY: Cardiovascular medicines

< >

Please select the medicine type and strength from list provided that you will be surveying. If a medicine used in your setting is not in the list, please choose "Other" and specify and enter the medicine name and strength.

- Losartan 25mg
- Losartan 50mg
- Losartan 100mg
- Telmisartan 40mg
- Telmisartan 80mg
- Valsartan 5mg
- Valsartan 10mg
- Other 1
- Other 2



Please survey only the medicines you pre-selected (can be more than one). Please ask the pharmacist to provide you with data on the lowest unit price (not pack price)

For hypertension combinations (e.g. lisonipril+amlodipine, lisonipril+hydrochlorothiazide, perindopril+amlodipine+indapamide, telmisartan+amlodipine, telmisartan+hydrochlorothiazide, valsartan+amlodipine+hydrochlorothiazide)  
**Please select only the 1 combination that is most commonly used**

HOME > FACILITY DATA COLLECTION

Please select the losartan strength that you will be surveying \*

Note: this medicine has been predetermined based on your national essential medicines list. Please only survey data on the one type and strength you have previously selected.

Please choose an item

Are tablets or capsules in stock today? \*

Yes

No

Clear

What brand has the lowest unit price? \*

HOME > FACILITY DATA COLLECTION

Clear

What brand has the lowest unit price? \*

Cozaar

Who is the manufacturer of this product? \*

Merck

How many tablets are in this pack? \*

100

Do people have to pay for this medicine? \*

Yes

No

Some people have to pay and some do not

Clear

## FACILITY SURVEY: Cardiovascular medicines

For each medicine, ask if it is in stock **today** (for supply to **outpatients**).  
If 'YES':

Provide information on the medicine with the **lowest unit price** (price per tablet/capsule). Then enter the number of tablets/capsules in the pack

**Do people have to pay? Payment for each medicine.** From the drop-down list, select

- 'Yes' if all people must pay the facility for the medicine;
- 'No' if it is supplied free-of-charge to all;
- 'Some people have to pay and some do not'.

**Remember: outpatients only**

**If 'Yes' then enter the full patient price for that pack.** Do not enter the name of the local currency (eg. Uganda shilling) as it has already been entered into the app.

If people pay but not the full price, select the most common reason - a co-payment, the cost of the insulin is included in a service fee, or 'Other'

# FACILITY SURVEY:

Blood pressure monitoring device

HOME > FACILITY DATA COLLECTION

Do you have a functioning validated digital machine in your facility that you use to check blood pressure of outpatients? \*

Yes

No

Clear

Do people have to pay for blood pressure checks? \*

Yes

No

Some people have to pay and some do not

In the last 7 days how many outpatient blood pressure checks did you do? \*

Bottom navigation bar: back, refresh, home, and menu icons.

## Outpatient testing in the facility

Is the test available in the facility?

All pay/all free/some pay & some free?

Cost per test?

How many tests undertaken in last 7 days?

# **FACILITY SURVEY: Diabetes Management**

For diabetes management, metformin and sulfonylurea questions will be repeated for each medicine, in the similar manner to the cardiovascular medicines.

- Metformin
- Sulfonylurea - gliclazide, glimepiride, glipizide, glibenclamide
- Thiazolidines-pioglitazone
- Gliptins (DPP-4 inhibitors) - vildagliptin, sitagliptin
- SGLT-2 – empagliflozin, dapagliflozin, canagliflozin
- GLP- 1 – semaglutide, dulaglutide, liraglutide, tirzepatide

Insulin will include all types and brands of insulin as well as the different presentations

- Regular, NPH and mixed regular/NPH human insulin, rapid-acting, long-acting and mixed analogue insulin, 100IU/ml in vials/prefilled pens/cartridges
- Insulin syringes and pen needles
- Blood glucose meter and test strips
  - Lowest cost brands
- Fasting plasma glucose machine
- HBA1c testing machine
  - How much outpatient tests costs and how many per week

# FACILITY SURVEY: Insulin

← Facility Data Collecti... :  
Insulin

Now I would like to ask you more specifically about the insulins you have in stock.

Do you have any insulin in your facility today? \*

Yes

No

CLEAR

How many different brands and presentations are in stock today? \*

2

The following questions on insulin will be repeated 2 time(s)

Starts asking about **insulins in stock on that day for supply to outpatients**

- Ask to see all to verify they are available
- Enter the number of different brands & presentations (vials, prefilled pens, cartridges)
- If insulin is only for emergency use or inpatients only or arriving tomorrow, select 'No'
- Exclude reusable pens as they do not contain insulin

← Facility Data Collecti... :  
Insulin Information (1) > Insulin Information

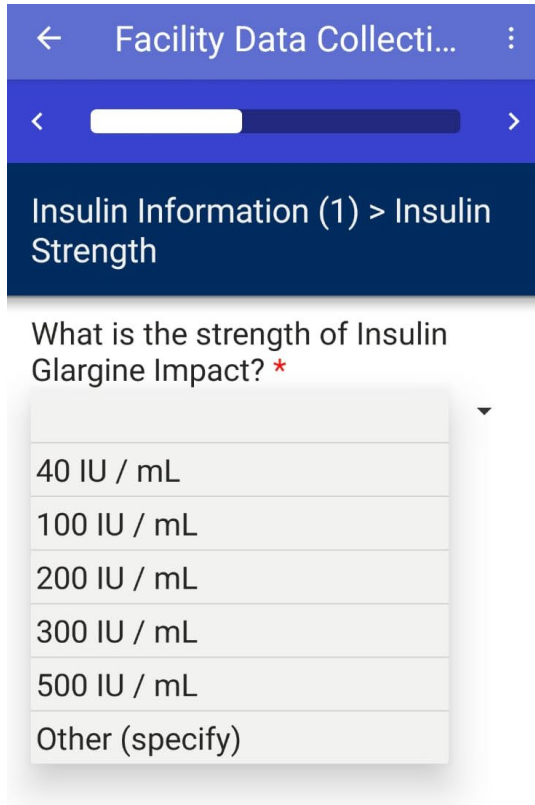
What is the brand name of the insulin you have available? \*

Insulin Glargine Impact

International Proprietary Name: Glargine  
Insulin Type: long-acting analogue, originator brand  
Manufacturer: Sanofi

**Insulin Brand**  
The list of brands is not in alphabetical order. Type the first few letters then select the brand from those that appear.

# FACILITY SURVEY: Insulin



← Facility Data Collecti... :  
< [Progress Bar] >  
Insulin Information (1) > Insulin Strength

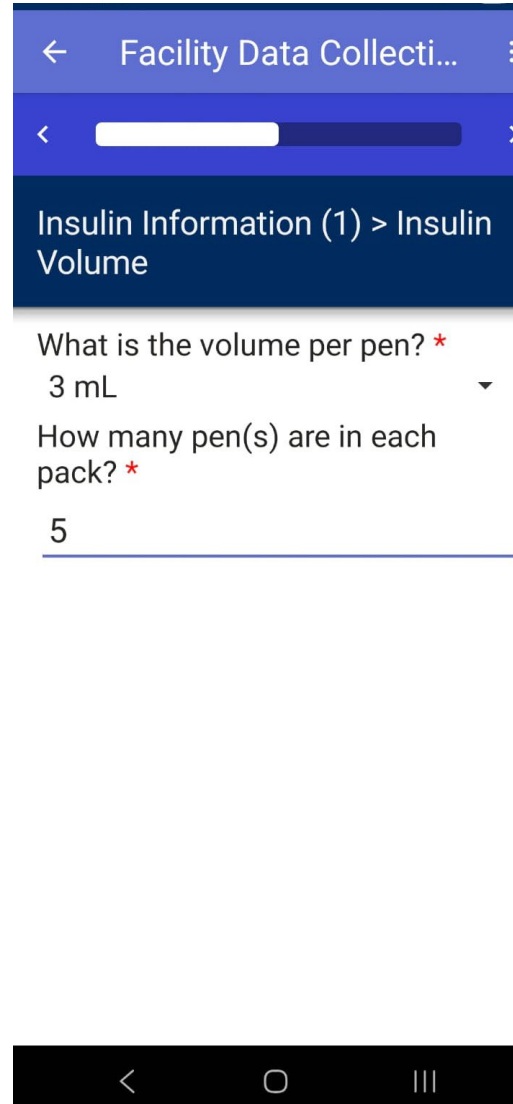
What is the strength of Insulin Glargine Impact? \*

- 40 IU / mL
- 100 IU / mL
- 200 IU / mL
- 300 IU / mL
- 500 IU / mL
- Other (specify)

**Insulin Strength**  
Printed on the pack

Nearly all are 100IU/ml (exception is Toujeo 300IU/ml).

Note: Mixtard is 100IU/ml not 30/70.



← Facility Data Collecti... :  
< [Progress Bar] >  
Insulin Information (1) > Insulin Volume

What is the volume per pen? \*  
3 mL

How many pen(s) are in each pack? \*  
5

**Insulin pack size and volume of insulin in the presentation (vial, prefilled pen or cartridge)**

- vials are supplied as 1 and the volume of insulin is usually 10ml
- prefilled pens and cartridges are usually in packs of 5 and the volume of insulin is usually 3ml. But can be sold as 1.
- Exception is Toujeo 300IU/ml which usually is 1.5ml

**Be aware of what is on the market before starting data collection**



← Facility Data Collecti... :

< [Progress Bar] >

Insulin Information (1) > Insulin Price

Do people have to pay for Insulin Glargine Impact ? \*

Yes

No

CLEAR

What is the full patient price you charge for this pack? \*

*In pill(s), for patients who have to pay out of pocket*

26

If patients are not paying the full price for Insulin Glargine Impact what is most often the reason?

## FACILITY SURVEY: Insulin

**Payment for each insulin.** From the drop-down list, select

- 'Yes' if all people must pay the facility for the insulin;
- 'No' if it is supplied free-of-charge to all;
- 'Some people have to pay and some do not'.

**Remember: outpatients only**

**If 'Yes' then enter the full patient price for that pack of insulin e.g.** if the pack contains 5 x 3mL pre-filled pens, then enter the price for that pack - not the price for one pen. Do not enter the name of the local currency (eg. Uganda shilling) as it has already been entered into the app.

If people pay but not the full price, select the most common reason - a co-payment, the cost of the insulin is included in a service fee, or 'Other'

## **FACILITY SURVEY:** Delivery devices and self-monitoring

Next sets of questions are for the following *when used in the home*:

- insulin syringes (IU on barrel)
- pen needles (for use with prefilled pens)
- blood glucose monitoring meters
- blood glucose monitoring strips

Available? All pay/all free/some pay & some free?  
Brand and manufacturer of product with the *lowest unit price* (enter pack price and pack size)



**FACILITY SURVEY:** Outpatient testing in the facility

(1) Blood glucose testing using a meter and test strip

(2) HbA1c (glycated haemoglobin) testing

For each:

Is the test available in the facility?

All pay/all free/some pay & some free?

Cost per test?

How many tests undertaken in last 7 days?

# FACILITY SURVEY: Sickle-cell disease

Please select the strength from list provided that you will be surveying. If a medicine strength used in your setting is not in the list, please choose "Other" and specify and enter the strength.

Hydroxyurea 100mg

Hydroxyurea 200mg

Hydroxyurea 500mg

Hydroxyurea 1g

Other 1

Other 2

For sickle cell disease hydroxycarbamide (hydroxyurea), deferasirox, deferiprone will be included. Please fill these out similar to other medicines.



Thank you so much for your time  
and providing this information.

General Comments

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When you finish the interview, it is wise to not initially hit 'Finish'.

Immediately review the findings in the app and when you are happy that they are complete and make sense, then hit 'Finish'.

Note: if you don't hit 'Finish' all the data will be lost so it is a crucial step!

# NEXT STEPS:

## PILLAR 1

- You will receive a detailed manual with more details about the app, and further explanation about recruitment and form to return
- You will also receive a custom log-into the survey
- Finalize your medicine list, begin recruitment of facilities
- You can join this whatsapp group for questions, discussions

## PILLAR 2

Use this code to begin survey

Read instructions completely

Questions?  
Molly@haiweb.org



Comments or  
questions, please  
contact Molly for  
support

[molly@haiweb.org](mailto:molly@haiweb.org)

