SUMMARY OF LANDSCAPING OF DIGITAL HEALTH TECHNOLOGIES INITIATIVES
ACROSS VARIOUS COMPANIES AND ORGANIZATIONS

1. Background

There is a growing consensus in the global health community that innovative DHTs are one of the essential enabling factors towards ensuring better health outcomes. Indeed, over the past years players across the sectors – governments, development partners and donors, the private sector, civil societies, academics, and NGOs – have been increasingly exploring, experimenting with, and introducing new technologies, tools, and processes across the care cascade – the trend that has been even further accelerated by the COVID-19 pandemic.

2. Goal and objectives

The Stop TB Partnership and its various teams and initiatives, including the CCS4I team, TB REACH, and the Global Drug Facility, have been at the forefront of rolling-out digital solutions even prior to the COVID-19 pandemic, the EASI team believe it was crucial for the organization to have a clear understanding of the vibrant digital solution’s landscape and its key actors across the public and private sector to strengthen the value proposition and increase the potential impact of the RTC initiative. The EASI team undertook a digital solutions landscape mapping exercise to explore and analyze other organisations’ initiatives this space, and, more specifically, to:

- Assess the current status quo of global digital solutions initiatives, including the key actors, missions, objectives, activities, innovations, common trends, barriers, opportunities, etc.;
- Establish whether the RTC initiative’s mission and objectives is an unmet need; and
- Identify most promising global partners, with complementary knowledge and expertise, that could be engaged in the RTC Design Group.

3. Methodology and scope

The benchmarking involved data collection and analysis on 40-plus companies and organizations, active in the global health and DHTs (from which 28 organizations with most relevant DHT initiatives have been analyzed in-depth) across four (4) categories:

- Bi-lateral agencies, private foundations, and other funders (e.g., BMGF, Gavi, the Vaccine Alliance, Global Fund, USAID, and US CDC);
- Non-governmental organizations and technical agencies (e.g., AMREF, FHI 360, FIND, KNCV, and PATH);
- Private sector companies (e.g., Bayer, GSK, J&J, Merck, Novartis, Pfizer, Roche, and Verily); and
- United Nations and international organizations (e.g., UNAIDS, UNDP, UNFPA, UNICEF, UNITAID, WEF, and WHO).

The EASI team is cognizant that a multitude of other organizations – global and country-specific, from public, private and development sectors – have DHT-related initiatives and have not been included in this study and also recognizes that the in-depth analyzed organizations are involved in other innovation-related projects, aside from the ones explicitly mentioned in the landscaping.

The subset of analyzed organizations and respective initiatives has been selected based on the RTC initiative’s positioning – current and envisioned – in the TB and global health space and is actively considering key partnerships and relationships fostered with other players.
4. **Key findings**

The benchmarking key findings and insights fall under three (3) main categories and trends as itemized below.

4.1 **DHT/Innovation scope**

Only a handful of the analyzed entities have clearly defined technological verticals (e.g., UNICEF Venture Fund) or DHT types they are focused on. Most players broadly state the areas of interest, either by specifying the stage of the care journey or the intervention area (e.g., diagnostics, maternal health). In some cases, the innovation scope remains unspecified – both because of the scale of operations (e.g., UNDP) and because of the initiatives’ more ad hoc nature. Few organizations prioritize community-based innovations (e.g., PATH, UNAIDS), no organization is explicitly focused on home-based innovations.

4.2 **DHT/Innovation and organizations’ positioning and strategy**

Several entities embrace innovation as part of their DNA, elevating it to one of strategic objectives (e.g., AMREF, FHI 360, UNDP). In some cases, however, this might be more branding and marketing driven. Partnering is widespread – both inside the UN system (e.g., UNFPA, WFP), and across sectors. Indeed, strongly positioned organizations (e.g., UNICEF) openly engage with corporates to maintain thought leadership and stay ahead of the curve.

4.3 **DHT/Innovation and organizations’ structure and functions**

Most analyzed organizations have a dedicated innovation team, in some cases – a function (e.g., UNICEF, private sector), or even an innovation-focused spin-off (e.g., PATH’s Digital Square). Separate investment vehicles are also common (e.g., FHI 360, UNICEF). Most organizations clearly define their role, and type and level of support they can offer to innovators (FIND). This ranges from hands-on innovation product development (e.g., UNFPA, UNICEF), and providing technical assistance and funding, to a softer role of ecosystem connector (e.g., UNAIDS, WEF) through thought leadership and events.

5. **Key learnings**

The landscaping evidenced some best practices – having a clear innovation strategy, determining role, structure, type, and level of support, committing to strategic partnerships, and clearly defining the innovation scope. Regarding the latter, striking the right balance is crucial – too narrow of a target innovation scope can be counterproductive considering the speed of technology evolution. At the same time, in the context of finite resources, it is vital to set the perimeter of intervention. Moreover, the prioritized innovation areas should be aligned with the overall organization’s strategy. Consequently, focusing on community- and home-based innovations appears as a natural focus area for the Stop TB Partnership and the RTC initiative that – importantly – seems to be a need not yet targeted by other organizations.