



Project Antares



Improving Health for Low-Income Families Through Sustainable and Scalable Enterprise

About Project Antares

Poverty and poor health perpetuate each other. Project Antares (“Antares”), a collaboration between Harvard Business School and the Harvard School of Public Health was created to address both. Antares is dedicated to the development of self-sustaining approaches to healthcare for low-income populations, based on the premise that if high-impact interventions can be delivered using commercial systems, they can extend coverage significantly beyond what has been possible to date. Through market mechanisms, Antares believes high-impact interventions can be driven to the massive scale, permanence, continuous efficacy and continuous efficiency necessary to generate lasting social impact.

The Antares Matrix: Defining Health Priorities

Building on traditional measures such as mortality, morbidity and cost-effectiveness, the Antares prioritization model also incorporates household income, impact on women, and other medical and social externalities to identify those health issues that have a disproportionate impact on a poor family’s income. The results have been compiled into a series of Antares matrixes, on a global and regional basis. The top of these lists, the “Antares Top Ten,” orients Project Antares efforts. While currently limited to internal use, Antares intends to make this tool available in the future to decision-makers and the general public, and encourage ongoing, open-source data refinement.

Field Studies: Understanding and Building Pioneering Models

Interventions that target Antares Top Ten health issues exist, but may not be widely known or have achieved commercial sustainability or scale. Antares works to identify and partner with field organizations which deliver such interventions, deploying joint teams of public health and business students to analyze and help improve existing models or develop new ones to meet Antares objectives. Since 2007, Antares has engaged 77 students in 14 projects spanning 11 countries of Latin America, Africa and Asia. Field study outcomes are threefold. All partner organizations report meaningful contributions to their thinking, strategy or operations as a result of the Antares collaboration (see Select Antares Field Studies, herein). Many Antares students continue to pursue related work, holding promise that Antares can help address a key bottleneck by inspiring young professionals to join in the creation of market-based solutions to address poverty (see Antares Alumni in the World, back cover). And involvement with pioneering organizations and projects continually builds Antares’ intellectual capital to help advance the field.

Changing Healthcare for the Poor

Ultimately, Antares seeks to transform access to effective healthcare by the poor of the world through market-driven interventions that can significantly complement public health systems. It projects achieving this via collaborations with existing programs, the design of new models that will become industry examples and the dissemination of new knowledge across the academy, influencing the curricula of graduate schools of public health and business. In the process, it will broaden the reach of the private sector and help shape a conceptual framework for public health decision-makers to optimize the definition of national priorities and the regulation of commercial enterprises that provide healthcare to low-income families.

Getting Involved

To learn more about ways in which you can support the work of Project Antares, please contact:

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Select Antares Field Studies

Pro Mujer: a microfinance institution offering health services in Bolivia, Nicaragua, and Peru



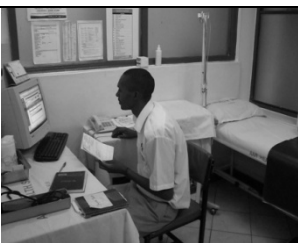
The first Pro Mujer team assessed the health services provided to Pro Mujer clients in three countries with different operating models and results. The team also investigated external factors such as microinsurance and alternative service providers. Although Pro Mujer is best known as a microfinance provider, the Antares team concluded that health services help attract and retain clients, not to mention differentiating Pro Mujer from the competition. The team's recommendations helped Pro Mujer management to view the business potential of its health services in a new light. The following year, the second Antares team helped Pro Mujer design a pilot for expansion of health service in the El Alto region of Bolivia. The team recommended a phased model to first strengthen Pro Mujer's health infrastructure and later expand service provision. The next team reviewed the implementation status, and recommended adjustments to improve the program in an increasingly competitive market. Pro Mujer continues to work toward a health offering that will best meet the key needs of its target market. The impact of this work could reach beyond Pro Mujer. If delivery of health services from a microfinance platform can be achieved in a sustainable and replicable fashion, this learning could represent a real opportunity to improve the primary healthcare available to the vast market of microfinance clients worldwide.

VisionSpring (formerly Scojo Foundation): a multi-channel franchise system to sell reading glasses in India

The VisionSpring team explored the reasons why vision entrepreneurs' sales of eyeglasses were lower than projections. They identified a number of factors and formulated suggestions about how VisionSpring might adjust its operations to improve performance. VisionSpring management credited the Antares team's work with having surfaced some key strategic issues which had not previously been apparent, and provided the impetus to reexamine their strategy in a new light. VisionSpring management has used the team's report to open dialog with staff, and continues to explore the possibility of implementing a number of the Antares team's recommendations related to product mix, new markets and segments, salary and incentive structure, and marketing strategy.



LiveWell Clinics: one-stop shops to make health care and products accessible throughout Kenya



The LiveWell Clinics team helped the founder to grapple with a financial model that wouldn't breakeven and design a new approach, re-thinking her market penetration strategy, while further fleshing out plans for the organization's structure, financials, and roll-out. LiveWell management credited the Antares team with challenging every aspect of her model, from the proposed operating structure and processes, to the market-entry plan, in order to come up with an approach that would be financially viable given capacity constraints and target price points. The team's analysis and projections provided substantial inputs for the founder's business plan, with which she is in the process of raising launch capital.

Living Goods: an Avon-like franchise system to deliver health-related products in Uganda

The Living Goods team explored the supply chain for product sourcing, including the pricing and margins of alternative channels. The team also analyzed the viability of a series of prospective future products and made recommendations about product mix and incentives. This team was in the field just months after Living Goods' initial launch, an important time to help validate and refine management thinking. The team's supply chain research confirmed that Living Goods' pricing was somewhat better than market alternatives, a key tenet of its economic model. The team also helped Living Goods realize the need to consider existing product adoption in planning training and promotion, and identified the type of health education materials needed to support health promoters' work.



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Select Antares Field Studies

Embrace: *A \$25 incubator to sustain low-birth-weight babies in Nepal*



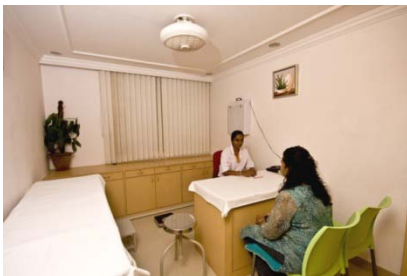
The Embrace team tackled the question of how to distribute a \$25 incubator to the people who would need it most, often in hard to reach areas. They identified three prospective channels to cover the spectrum of market segments and detailed an implementation approach for each. Embrace management credits the Antares team with helping to refine its thinking about several key aspects of its model, from organizational structure to how to go to market. The team's illustration of how to reach various market segments, and the potential to achieve breakeven faster via a staged roll-out strategy, caused Embrace to begin to seriously explore a cross-subsidy model. As Embrace management works toward launch in India, it continues to use the Antares team's financial model to quantify new markets.

Health Access Corporation: *An approach to increasing health and nutrition benefits access in the Mississippi Delta*

An Antares team, working with various partners through the Delta Directions Consortium, analyzed the healthcare market in the Mississippi Delta region of the U.S. to conceive of potential commercial interventions that might contribute to better health and economic development in the Delta. The team identified significant under-enrollment in Medicaid, CHIP, WIC and SNAP programs. They developed a potential model which would engage a network of community agents supported by an information system to facilitate the enrollment and re-enrollment processes, enabling more eligible families to make use of health and nutrition benefits, while generating employment.



AyurVAID: *a hospital network that delivers ayurvedic healthcare to low-income populations in India.*



AyurVAID is a network of small (15-30 bed) hospitals which blend traditional Ayurveda and modern allopathic approaches with a focus on chronic disease management. The Antares field study team explored the health impact, robustness of the economic model, and implications of projected rapid growth for AyurSEVA, the organization's program targeted to low-income markets. The team identified four pillars for SEVA's long-term sustainability and delivered recommendations to strengthen each component. The team also recommended ways to increase SEVA's competitiveness through improved marketing and HR strategies. Finally, the team developed an evaluation model to assess the health impact of SEVA's operations. The team's analysis provided substantial inputs to AyurSEVA's growth plan. AyurVAID management credits the Antares team with impacting their overall thinking and has begun to implement its recommendations.

CARE: *a hub-and-spoke model using Village Health Champions for delivery of primary healthcare to rural India.*

CARE Hospitals, a profitable, private network of 11 tertiary care hospitals in India, is working to extend primary and secondary care to the vast, under-served rural market on an effective, sustainable basis. To do so, CARE has developed a hub-and-spoke model which further leverages physicians and infrastructure by engaging village health champions (VHCs) to reach patients in distant markets. The Antares field study team examined the functioning of CARE's rural health model from an economic and health perspective, seeking ways to optimize performance. The team's analysis helped CARE management refine their thinking about a few key elements of operations, and revisit the financial model. CARE is currently examining implementation of Antares recommendations in specific areas, as they plan to expand across India.



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Antares Alumni in the World

Gabriela Salvador, MD, MPH

Antares - Pro Mujer Project, 2008



Gabriela was born and raised in Argentina. After medical training and a residency in ophthalmology, Gabriela pursued clinical practice in both public and private sectors. The desire to shift from community to population-level health led her to pursue an MPH at HSPH. Gabriela worked with the Antares – Pro Mujer project in 2008, which emphasized the power of health services linked to a microfinance platform, both to further Pro Mujer’s mission and to differentiate itself in the increasingly competitive microfinance markets of Latin America. For Gabriela, “Antares is a unique opportunity for HSPH and HBS students to reach populations in need, working on high impact, complex projects that require a multidisciplinary approach – my most enriching academic experience by far.” After the project was completed, Pro Mujer management continued to seek Gabriela’s input as a consultant and advisor, and in 2010 convinced her to leave her position at Partners Healthcare in Boston to become Director of Health and Human Development Services for Pro Mujer International. Today, with Gabriela’s help, Pro Mujer is fully committed to the strategic importance of its health services. Gabriela’s team is currently piloting a new approach, designed to be financially self-sustaining, which incorporates regular screening and follow-up to improve preventative care for all clients. The 2011 Antares Field Study team (3 students each from HBS and HSPH) will be an integral part of that effort, with Gabriela’s role coming full-circle in Antares, from student participant to project partner.

Jun Fukuyoshi, MBA

Antares - LiveWell Clinics Project, 2008



Prior to HBS, as a brand manager for Proctor & Gamble in Japan, Jun developed deep experience in marketing strategy and execution, with a particular appreciation for the importance of customizing for targeted consumer segments. With Project Antares, he worked on the LiveWell Clinics project, focused on the design of a sustainable model for a chain of pharmacies and clinics to reach underserved communities in Kenya. “Before Antares, I didn’t know how much marketing could impact healthcare,” Jun recalled. “The idea that I could help save lives with skills that I had learned in business and at HBS has never stopped exciting me.” Together with a Japanese friend at HSPH, Jun returned to his country to establish CancerScan, a commercial firm that applies marketing targeting strategies to public health. With cancer a major issue, despite universal health insurance and a solid public health infrastructure, only 20% of Japanese women over 40 were getting screened for breast-cancer, compared with 70% in the U.S. Within six months, CancerScan had tripled the number of breast cancer screenings in Japan. It is now well-known, growing and profitable. “Even after 2 years, every morning I still jump to my feet to go to work,” Jun said. “I cannot thank the faculty and the donors behind Antares enough.”

Leeda Rashid, MD, MPH

Antares - CARE Hospitals Project, 2009



Born in Afghanistan, to which she remains deeply connected, Leeda trained as a physician. Prior to Antares, her background included clinical research and practice, health education through media, and participation in the Rural Expansion of Afghanistan’s Community-Based Healthcare (REACH) program of the Ministry of Health. At HSPH, Leeda was part of the Antares - CARE Hospitals project, focused on expanding primary and secondary care to rural communities in India. Now finishing her residency in family medicine, Leeda credits the Antares experience with “altering the trajectory” of her career. “Antares opened my eyes to the fact that it is impossible to address the clinical issues if we can’t address the socioeconomic issues. I realized that I would be frustrated working at the individual level – I need to do something with broader impact.” Leeda spent a month in Afghanistan conducting an assessment of emergency and acute care, with the hope that an evidenced-based approach may support improved health priority-setting and care delivery. Surveys and focus groups highlighted challenges related to the availability of high-quality pharmaceuticals, leading Leeda to expand her current research to include better understanding the Afghan pharmaceutical supply chain. As she considers potential avenues to address Afghanistan’s health gaps, Leeda said, “Through Antares I have come to see that commercial approaches hold great potential – this is a new way of thinking for me.”



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