

SANDPIPER HEALTHCARE TRACKER 2022

AN ANALYSIS OF PUBLIC EXPECTATIONS
IN ASIA PACIFIC



CONTENTS

03

Foreword

04

Executive summary

07

Introduction and
Methodology

08

How much of a priority
is healthcare to people
in Asia Pacific?

10

How satisfied are
people with healthcare
services?

14

Who should finance
health services?

15

What are the healthcare
priorities for people in
Asia Pacific?

16

Which disease areas
are priorities in Asia
Pacific?

17

Who has played a
major role in fighting the
COVID-19 pandemic?

18

What are the implications
for the healthcare industry
and governments?

20

Appendix

Improving healthcare across Asia Pacific

The importance of healthcare policy has come into sharp focus as the world continues to battle the COVID-19 pandemic. Overwhelmed hospital services, cancelled operations, longer waiting times and the heartbreaking human cost of the virus have underlined the importance of resilient health services and policies in Asia Pacific and beyond.

The importance of healthcare policy has come into sharp focus as the world continues to battle the COVID-19 pandemic. Overwhelmed hospital services, cancelled operations, longer waiting times and the heartbreaking human cost of the virus have underlined the importance of resilient health services and policies in Asia Pacific and beyond.

It has also shown the potential of healthcare innovation as companies have delivered game-changing solutions across the world in record time, but also highlighted significant challenges in ensuring access to these innovations to all who can benefit from them.

Even before the pandemic, policymakers in Asia Pacific were grappling with how to secure affordable, high-quality health services within their financial means. In parts of the region, illness and injury continue to mean financial hardship for many people and hard choices for them and their families. In high income countries in Asia Pacific with ageing populations, governments are grappling with how to ensure health systems respond to their growing needs.

As we begin to emerge from the height of the pandemic, it is important to examine public attitudes towards healthcare policies and services in Asia Pacific and whether they have shifted in the last two years so that this can guide future decision-making

by governments and healthcare organisations. How much of a priority is healthcare? How satisfied is the public with services provided to them? What are the priorities of patients and caregivers? And what does this mean for healthcare companies in terms of supporting people and patients, improving their health and enhancing access to better services and products in the region? How do regional variations in culture, economy and society influence people's attitudes towards healthcare?

Sandpiper has carried out an extensive study across 11 territories in the Asia Pacific to provide answers to these questions. We hope this in-depth look at people's expectations of health services in the region will shed light on the complex issues that policymakers face in meeting the needs of their populations and help healthcare organisations understand how best to support and collaborate with healthcare leaders to achieve this.



Emma Smith

Chief Executive Officer, Sandpiper

Executive summary

Healthcare policy is informed by numerous factors and stakeholders and represents a balancing act between population needs and expectations against resources available.

Sandpiper carried out extensive research across Asia Pacific in 2019 (pre-pandemic) and 2021 (pandemic), surveying almost 12,000 people, to understand their attitudes towards healthcare and how they have changed over time. This is especially important in the evaluation of how the COVID-19 pandemic has influenced people's attitudes towards the provision of healthcare.



Public policy priorities

Although Asia Pacific is a diverse region, commonalities were observed in terms of people's attitudes towards healthcare. Most notably, in 2021 'healthcare' was a top policy priority in almost all territories, along with 'education' and the 'economy and jobs'. This is a seismic shift in priorities since 2019 when healthcare was only a top three priority in half of the territories polled. This change is certainly driven by the pandemic and the effect it has had on the region and world.

'Healthcare' was the number one priority area in **Australia**, as it was in 2019. In **Hong Kong SAR, Japan, the Philippines** and **Singapore**, it ranked second in priority in 2021, significantly above 'education' in third place.

The only territory where healthcare did not rank in the top three priorities was **China**. Instead, 'defence and security' joined 'education' and the 'economy and jobs' as the top three priorities. The low number of COVID-19 infections in China in 2021 might be a factor in this divergence from the regional trend.

'Education' was the top-ranking priority across **Asia Pacific** in seven of the 11 territories. This focus on education was also important in 2019 but has increased and may be due to rising concerns about school closures and home learning due to the pandemic.





Satisfaction with healthcare services

Satisfaction with healthcare services was assessed in this study, as an indication of whether services were meeting expectations, and while there was considerable variation across the region, satisfaction averaged 61% for public and 62% for private healthcare services across territories in Asia Pacific.

However, there were major shifts in public satisfaction in several territories over the last two years. **Singapore** now has the highest level of satisfaction and saw the biggest rise in Asia Pacific, with 82% of people satisfied with public healthcare services in 2021, a considerable jump from 69% in 2019. This was most likely driven by the successful government response to the pandemic resulting in low mortality. Reasons for satisfaction highlighted by respondents included access, proximity to services and, healthcare professional expertise.

Indonesia saw the biggest drop in satisfaction in public healthcare services during the last two years, falling almost 20% from 71.3% satisfaction to 52% satisfaction, with a similar drop in satisfaction for private healthcare services. Cost, quality of services and attitudes of healthcare professionals were the main reasons for dissatisfaction in public healthcare services.

In 2021, people in **the Philippines** had the lowest level of satisfaction, with only 29% of people satisfied with public healthcare services and 50% for private services. Cost and access to care were the main reasons for this, reflecting that the territory is still far from achieving universal health coverage and out-of-pocket payment for healthcare services remains common. It has also been overwhelmed by COVID-19 outbreaks, which may have undermined confidence.

Across the region, level of healthcare professional expertise was the leading reason for satisfaction, while cost was the leading reason for dissatisfaction. Ability to access care was the second most common reason for satisfaction and the third top reason for dissatisfaction, highlighting the mixed views and experiences of healthcare services in the region.

Developing resilient health services that meet people's expectations is important for policymakers across the region. It is also important that healthcare organisations understand these concerns and work on practical solutions, supporting better services and models of care, as well as developing innovation that can support improvements in health.



Cost and efficiency

The research suggests that almost seven out of 10 people in Asia Pacific believe that government is financially responsible for healthcare in their territory. With all governments in the region having committed to universal health coverage and with cost being a major cause of dissatisfaction, increasing the efficient use of resources is crucial. Responses to the COVID-19 pandemic have also put significant pressure on many territories' healthcare resources and affected the pace of economic development across the region.

Collaboration between healthcare organisations and governments is vital for developing efficient services with limited funds. Preventing ill health and hospital admissions through health education, early screening and better disease management in the community are often the most effective ways of managing chronic conditions, improving quality of life, and minimising costs. Furthermore, making the case for higher quality services and supporting professional education and improved expertise among healthcare professionals is an important part of this.



Healthcare priorities

In nine out of 11 territories, people reported that they believed cancer should be the disease that government should prioritise for funding and resources, a similar level to 2019. Also high on people's agenda now are infectious diseases and preventing infectious disease outbreaks, which were both in the top three in most territories, clearly driven by the ongoing pandemic. **Thailand** and **the Philippines** ranked it as the highest priority for governments, which may have been influenced by the timing of the poll. Mental health was ranked in the top three in **Australia** in both 2019 and 2021. Diabetes, which had ranked in many territories in 2019 was squeezed out by infectious diseases prioritisation. Overall, more than half of respondents prioritised disease areas due to the severity of the illness, its significance (how widespread it is) and for the cost of treatment.

Although these high-profile diseases dominated the poll, wider healthcare issues also appeared in people's top three disease priorities often due to it being personally important to them. This shows how important it is to ensure the patient voice is incorporated into policymaking. This is something that many parts of the region continue to struggle to achieve in a meaningful way. But also worth noting was that in many territories, concern was also driven by people's personal contact with those illnesses, such as knowing somebody affected by the disease.

It is important that the attitudes of the public and patients are put at the centre of policymaking and service provision. This could improve decision-making by providing insight into what matters to them and how to support them to better manage complex conditions.



Further implications for the pharmaceutical industry

Almost six out of 10 people surveyed in Asia Pacific recognised pharmaceutical companies as being one of the major players in the fight against the COVID-19 pandemic, and in most territories. In **Japan**, they were the most recognised stakeholder, ranked above healthcare professionals and governments. There is recognition of the key role that vaccines have played in the pandemic, and the impressive feat achieved in bringing them to market, including manufacturing and delivering, in record time.

These achievements and recognition are a significant turning point in awareness and presents possibilities for the pharmaceutical sector. Adding to the increasing prioritisation of healthcare and the level of public satisfaction in healthcare services, there is huge opportunity to work with governments to improve services and outcomes. This should include continued research and development and bringing their extensive expertise and experience to collaborate with governments to improve health services and systems. Driving this should be understanding people's priorities and experiences, whether it indicates a gap that needs to be filled or an opportunity to engage.

Introduction and methodology

Partly thanks to advancements in healthcare expertise and innovation, people are living longer than ever before.¹

Across Asia Pacific, these trends are magnified. For the 11 territories surveyed in this report, the number of people aged over 65 almost doubled between 2010 and 2020 (from 179 million to more than 343 million). These demographic changes, along with rising expectations, are driving rapidly growing demand for healthcare services. As healthcare services and policies are developed to address these changes, it is important that the needs and expectations of their populations are properly understood.

Sandpiper carried out research in **Asia Pacific** in 2019 and 2021, surveying almost 12,000 people in total during that period. The surveys were conducted online by Dynata, an independent research company. Samples were recruited to be representative of the

public by gender, income and age of the populations being surveyed. Sample sizes for each country provided a 95% confidence interval with a 5% margin of error. Respondents included adults aged 18 to 74 years old.

In late 2019, we surveyed 5,780 people across six territories in Asia Pacific (Australia, China, Hong Kong, Malaysia and Singapore). In October 2021, we surveyed 6,000 people from 11 territories (Australia, China, Hong Kong, India, Japan, Malaysia, Singapore, Indonesia, Philippines, Thailand and Vietnam). This is a representative sample of territories from low to middle to high-income with diverse cultures and societies from across the region.



1. *The Lancet*, Global health: time for radical change? DOI: [https://doi.org/10.1016/S0140-6736\(20\)32131-0](https://doi.org/10.1016/S0140-6736(20)32131-0)

How much of a priority is healthcare to people in Asia Pacific?

In late 2021, when asked to prioritise government policy areas, people across 10 out of 11 (91%) of territories ranked 'healthcare' in the top three priority areas along with 'education' and 'economy and jobs'. **This is a dramatic shift since 2019, when health was only a top three priority in 50% of territories surveyed and is almost certainly driven by the COVID-19 pandemic.**

'Healthcare' was the number one priority area in **Australia**, as it was in 2019, and in **Hong Kong SAR, Japan, the Philippines** and **Singapore**, it ranked second in priority.

Interestingly, people's priorities in Hong Kong have shifted dramatically reflecting the major changes that have occurred during the last two years. In 2019, 'security and defence' was ranked third in terms of priorities, along with 'economy and jobs' and 'education'. However, in 2021, healthcare was a top priority (replacing 'security and defence') despite Hong Kong being one of the most successful territories at that time at controlling COVID-19 outbreaks with everyday life continuing in relative normality, against a backdrop of tight border controls.

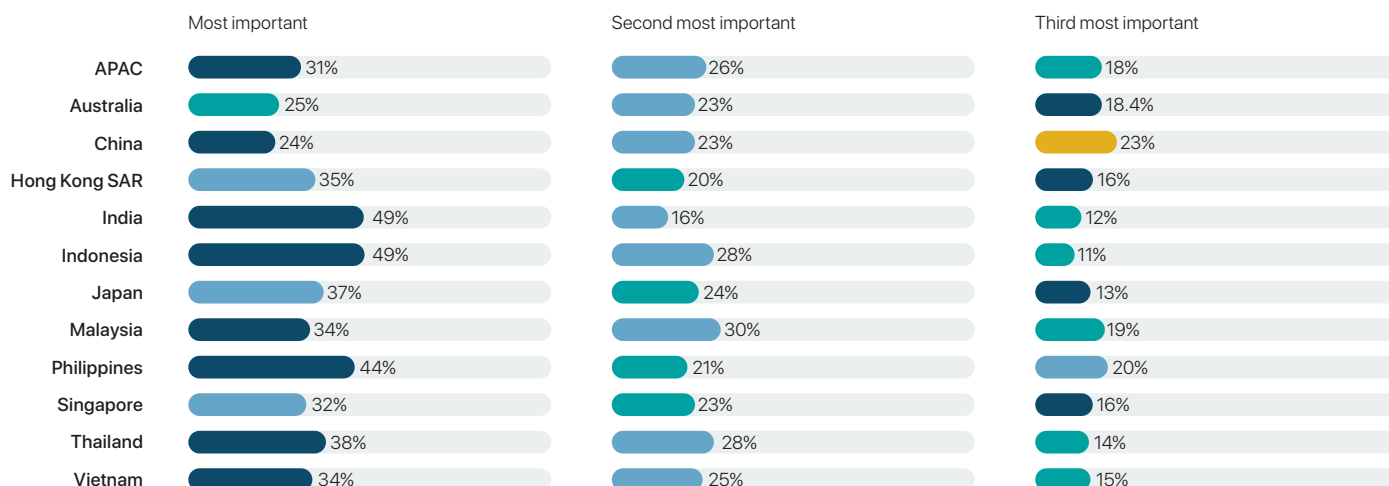
The only territory where 'healthcare' was not a top three priority was **China**, where 'education', 'economy and jobs'

and 'security and defence' were the top three. These were the same priorities in 2019 but 'security and defence' moved from top priority to third place and 'economy and jobs', which has risen significantly from 16.2% to 23%. This reflects concerns about a slowing economy and, indirectly, the changes brought by the pandemic.

Across the region, education was the highest priority overall, and a top priority in seven of the 11 markets. In **Indonesia**, education remained the top priority as it was in 2019. In **India** and **the Philippines**, two newly added territories, 'education' was also the top priority. This is likely to be driven, in part, by growing concerns about school closures or home learning due to the pandemic. Equally, 'economy and jobs' being a growing priority is also likely to be driven by the impact of the pandemic on economies in the region.

How much of a priority is healthcare to people in Asia Pacific?

● Education ● Economy & Jobs ● Healthcare ● Security & Defence



As healthcare is now a top priority across most **Asia Pacific** territories, supporting the development of high-quality resilient healthcare systems is important. Given their expertise and international experience, many healthcare companies and charities are in an excellent position to collaborate with governments and policymakers to improve health and healthcare; and as the public is focusing on this area, companies should clearly communicate their efforts for improving the lives of patients and their families and caregivers.

"Healthcare was the number one priority in Australia and, second in Hong Kong SAR, Japan, the Philippines and Singapore."

How satisfied are people with healthcare services?

Are healthcare services meeting people's expectations? To answer this question, we asked how satisfied people were with the public and private health services available to them as this is a good indicator of whether expectations are being met. There were considerable variations across the region but averaged around 61% for public services and 62% for private services.

People in **Singapore** had the highest level of satisfaction in their public healthcare services at 82%, a considerable jump in satisfaction compared to 2019 when it was 69% and likely linked to the significant support for the city-state's response to COVID-19. Singapore, a high-income territory, has largely achieved universal health coverage through a mixed financing system, with extra support provided for older citizens. This was supported by the restructuring of the public health landscape into three integrated care clusters. When asked the reason for being satisfied, people in Singapore highlighted the ability to access services, healthcare professional expertise and proximity to services.

At the other end of the spectrum, in 2021, only 29% of people in **the Philippines** were satisfied with the public healthcare services, rising to 50% for private healthcare services. This is the first time that the Philippines

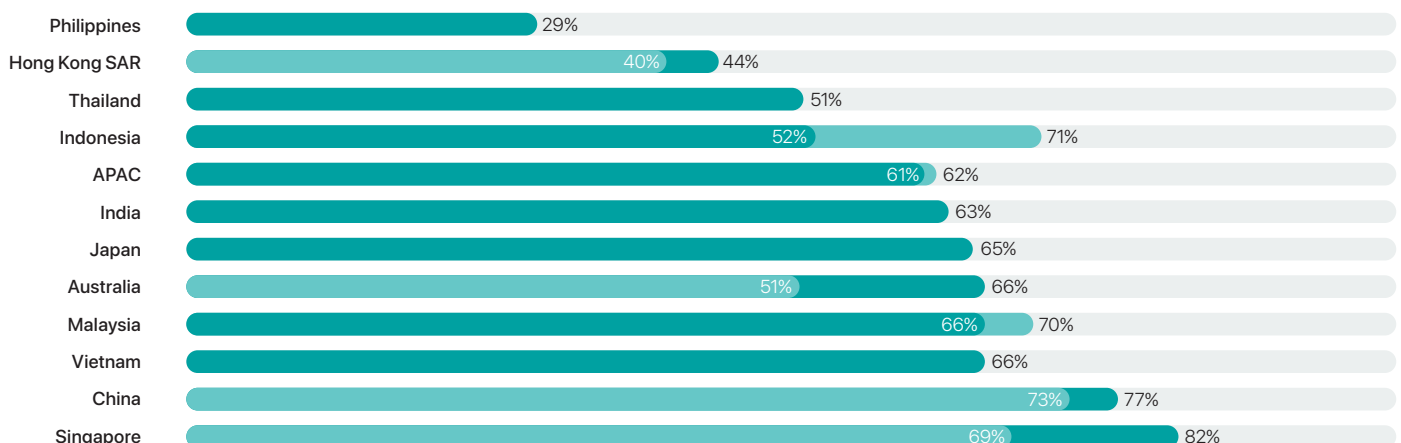
has been included in this analysis, but we expect this to persist due to long term resourcing issues that have been exacerbated by the COVID-19 pandemic.

Over 50% of people in the Philippines who were surveyed said dissatisfaction was due to cost, followed by ability to access services and support from healthcare professionals. The Philippines is committed to universal health coverage. However, challenges in financing the health system and retaining healthcare professionals undermine its healthcare services, while stories of corruption in the public healthcare insurance provider, Philippine Health Insurance Corporation (Philhealth)² undermine public confidence and will undoubtedly add to dissatisfaction.

Indonesia has seen the biggest drop in satisfaction in public healthcare services during the last two years, falling

Public healthcare satisfaction 2021 vs 2019

● 2021 ● 2019



almost 20%, from 71.3% satisfied to only 52% satisfaction. A similar drop has occurred for private healthcare services. Cost, quality of services and attitudes of healthcare professionals were the main reasons for dissatisfaction, but interestingly cost was a reason for satisfaction as well, along with ability to access care and healthcare professional expertise. Indonesia has been hit hard by the COVID-19 pandemic with ongoing lockdowns, with over 140,000 deaths. This almost certainly plays a major role in the drop in satisfaction for healthcare services.

**"Satisfaction
in public
healthcare
services in
Singapore
jumped from
69% to 82%."**





Across **Asia Pacific**, 'healthcare professional expertise' was the top reason for satisfaction, reflecting the trust and high regard that people in Asia Pacific give to the medical profession



In 10 out of 11 territories, **cost** was the number one reason for dissatisfaction.



Nine out of 10 people were satisfied with GP services, with people in **China at 89%**.



Access to healthcare as a reason for both satisfaction and dissatisfaction.

Reasons for satisfaction and dissatisfaction in healthcare services

After answering how satisfied or dissatisfied they were with public healthcare services, respondents were asked for their reasons. Across **Asia Pacific**, 'healthcare professional expertise' was the top reason for satisfaction, reflecting the trust and high regard that people in Asia Pacific give to the medical profession. This was followed closely by having the 'ability to access care'.

A stronger picture emerges for reasons for dissatisfaction. In 10 out of 11 territories, cost was the number one reason for dissatisfaction. This reflects a recognition that for many in the region, having healthcare issues can be a significant financial burden. The exception was **Hong Kong SAR**, a territory where public healthcare is heavily subsidised, where waiting times was the top reason, followed by cost.

In many parts of Asia Pacific, particularly low to middle income territories, major health issues are often paid for out-of-pocket and can result in financial hardship for people and their families. All territories are committed to Universal Health Coverage. However, cost remains a key challenge for many lower income territories and COVID-19 has redirected government resources to battling the pandemic (and affecting economies and public coffers).³

Access to healthcare was a reason for both satisfaction and dissatisfaction. Ability to access care was a key reason for satisfaction in many territories including **Japan** (where it was the number one reason), **Malaysia**, **Singapore**, **Indonesia**, **China**, and **India**.

Satisfaction with individual healthcare services

Satisfaction with different health services was high but varied across all territories. Satisfaction with GP/primary care services tended to be the highest across most territories in Asia Pacific, and higher than overall satisfaction.

In **Singapore** and **Malaysia**, nine out of 10 people were satisfied with GP services, with people in **China** at 89%. Most other territories had eight out of 10 people satisfied. Even in **the Philippines** where general satisfaction in health services was low, people were satisfied with primary care which represents the services people use most often.

The exception was **Japan** where satisfaction was 69%, much lower than other services except mental health and care services. Although notably this was still higher than overall satisfaction with health services. Specialist services and A&E services received 80% satisfaction rates, with hospital services and dentistry following closely. Dentistry performed well in a number of markets including **Vietnam** and **Indonesia**.

"Satisfaction with GP/primary care services tended to be the highest across most territories in Asia Pacific, and higher than overall satisfaction."

2. In Philippines, coronavirus crisis led to massive PhilHealth corruption, whistle-blowers claim | *South China Morning Post* ([scmp.com](https://www.scmp.com))

3. OECD Health at a Glance: Asia/Pacific 2020: <https://www.oecd-ilibrary.org/sites/26b007cd-en/index.html?itemId=/content/publication/26b007cd-en>

Who should finance health services?

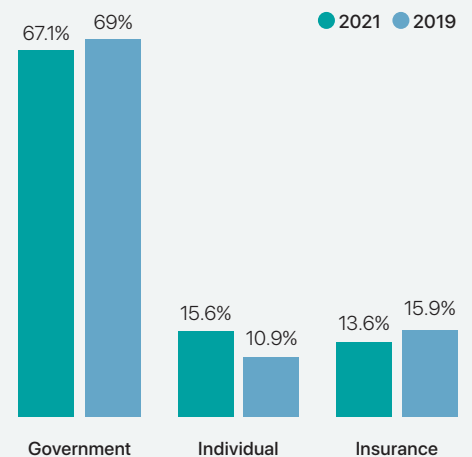
When asked who should pay for healthcare, the government was overwhelmingly named as most responsible across all markets.

In **Australia**, this figure was close to 80%, reflecting expectations of the well-established public health system.

Expectation that government should be financing healthcare has increased slightly over the last two years in **Malaysia**, (71% to 78%) and **China** (from 59.6% to 64%). However, in other territories, like **Singapore**, these expectations dropped from 67% to 61%.

Vietnam had the lowest expectation of government, with 52% believing government should pay for healthcare, followed by **Japan** (55%).

Who should pay for healthcare?



What are the healthcare priorities for people in Asia Pacific?

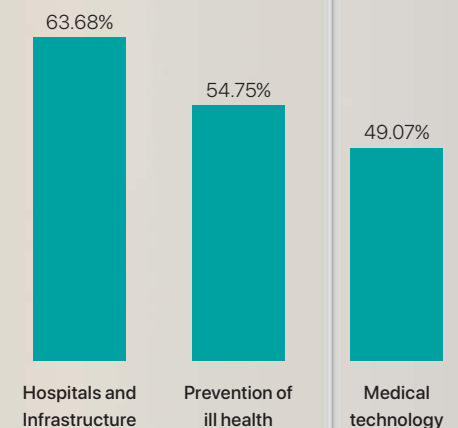
Recognising that resources and finances are finite, people were asked what their priorities were in healthcare and what they believed government should prioritise.

Across all 6,000 respondents in 2021, the majority agreed that hospitals and infrastructure was the top priority for government expenditure, followed by prevention of ill health and medical technology. Infrastructure is a significant investment in public health systems and would be seen as the responsibility of government, while public health is a long-term issue that needs government support. In **Japan**, people believed that prevention of ill health was the top priority, while the top choice in **Singapore** was ensuring affordable care.

Prioritising medical technology made it into the top three priorities in **China** (50% of respondents), **Indonesia** (50%), **Japan** (44%) and **Vietnam** (64%).

What should governments prioritise in developing health systems?

(% of all 6,000 respondents across APAC selected)



Which disease areas are priorities in Asia Pacific?

In nine out of 11 territories, respondents believed cancer should be the disease that government should prioritise for funding and resources.

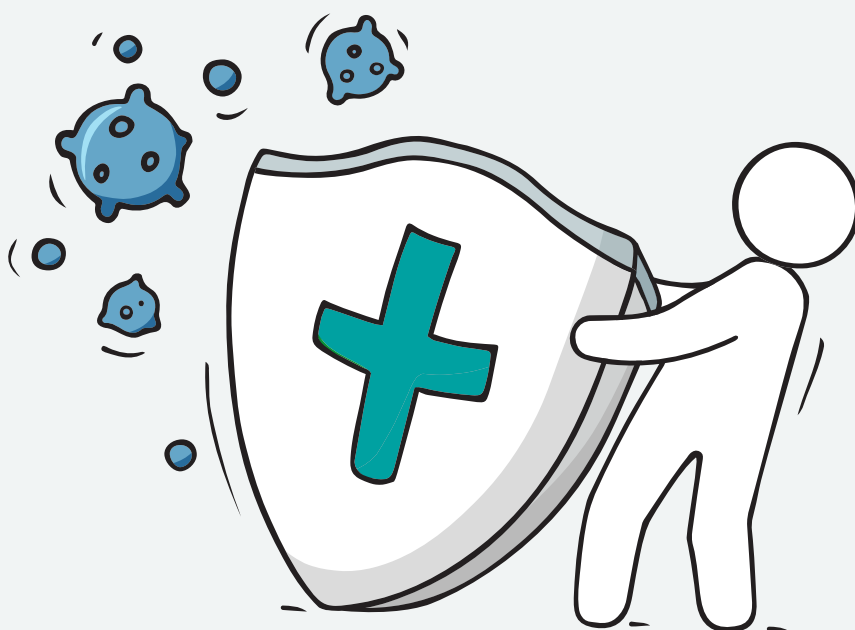
In nine out of 11 territories, respondents believed cancer should be the disease that government should prioritise for funding and resources.

When asked why they prioritised cancer, over half of respondents in the region said this was due to its severity, significance and cost of treating the disease.

Responding to infectious disease outbreaks appeared high in the rankings, a significant change from 2019 before COVID-19. Battling infectious diseases or potentially infectious disease outbreaks were not in the top three concern areas for **Australia, Malaysia, and Singapore** in 2019, but were present in the top three in 2021. **Thailand and the Philippines** ranked it as the highest priority for government.

Uniquely, Australians ranked mental health as the second biggest priority for government, reflecting the significant attention given to mental health in the past few years in this market. In comparison, **Vietnam and India** prioritised respiratory diseases among their top three priorities, along with cancer and infectious disease.

Although not ranking in the top three priorities, other diseases like cardiovascular disease and respiratory disease tended to be in the top three priorities for a third of respondents. These are likely driven by personal experiences.



4. OECD. Health at a Glance: Asia/Pacific 2020, Measuring Progress Towards Universal Health Coverage. <https://www.oecd-ilibrary.org/sites/7c360e27-en/index.html?itemId=/content/component/7c360e27-en#>

Who has played a major role in fighting the COVID-19 pandemic?

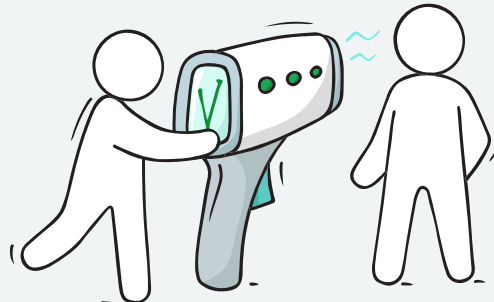
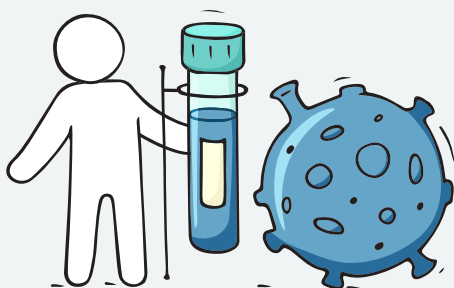
The COVID-19 pandemic has taken its toll on the world and its health services. When asked who has played a major role in the fight against the COVID-19 pandemic, people in Asia Pacific highlighted government, healthcare professionals and pharmaceutical companies.

In eight out of 11 territories, more people recognised governments in playing a major role, recognising the importance of public health measures that have been swiftly put in place. In **Australia**, **Hong Kong SAR** and **the Philippines**, healthcare professionals were most recognised. This reflects the heavy burden that the pandemic has weighed on frontline staff in many territories.

Almost six out of 10 people in **Asia Pacific** recognised that pharmaceutical companies played a major role in fighting the COVID-19 pandemic. In **Japan**, they were the most recognised stakeholder in the fight. This recognises the key role that vaccines have played in the pandemic, and the impressive

feat achieved in bringing them to market, including manufacturing and delivering, in record time. During this time, pharmaceutical companies have become household names and this could represent an important point of change in attitudes to this vital sector and potential opportunity for companies to strengthen their communications.

Out of Pharma, government, charities, healthcare professionals and other companies, which has played major role in fight against COVID-19?



What are the implications for the healthcare industry and governments?

As the research has demonstrated, healthcare is increasing in importance among people in Asia Pacific, while satisfaction has dropped in some territories. There is a clear mandate to prioritise improving health and healthcare.

Improving access to healthcare

Barriers to accessing healthcare and treatment are numerous and complex. A key barrier is cost, but also other factors such as health service availability, infrastructure, lack of diagnoses, long waiting times or poor health awareness. Healthcare organisations can support policymakers to improve access by helping them overcome these barriers. Healthcare organisations are a diverse group including charities, hospital groups, medical technology, pharmaceutical companies and insurers. They each bring their own expertise and experience, often informed by global footprints.

Patient voice

Ensuring the patient voice is part of policymaking and service delivery is vital to ensure that health services meet their needs and are shaped by their priorities. It can also enable a better understanding of the value brought by healthcare services, better support people to manage complex conditions at home and away from healthcare settings, and better strategies for companies to craft their communications in order to demonstrate their priorities and strengths.



"Improving how health conditions are managed can prevent hospital admissions and further complications which increases costs while reducing quality of life."

Patient engagement

Communications plays an integral role in improving patients' engagement in their health and conditions. For many long-term conditions, the majority of healthcare management is carried out by patients and their caregivers at home. So being informed and empowered are vital for better outcomes.

Patients now routinely enter consultation rooms equipped with health information found online or obtained from friends, and with opinions on what their care should look like. Healthcare systems in the region must therefore reframe traditional beliefs about the roles of doctors and patients and acknowledge the latter's desire to play an active role in care decision-making.

In-clinic services such as nurse educators and peer advocates can provide patients with holistic perspectives about their health that can translate to better compliance with medication regimes and lifestyle changes, and ultimately in better outcomes. Patient advocacy groups are also important allies and should be brought into the health ecosystem as active supporters of both patients and providers. Ultimately, governments and corporations should work together to educate the public about health, prevention, disease management, and quality of life issues to achieve a better overall health for society and use of limited resources.

System strengthening and sustainability

Providing innovative technology and medicines is important but these alone are not enough. Active collaboration between all stakeholders – policymakers and health services, pharmaceutical companies, insurers, patients, caregivers, and the general public – is imperative to achieve the maximum overall benefits of resource-strapped systems. It is the responsibility of all of us to aim for the best possible outcomes.

There are many examples of public private partnerships across the region, where the healthcare industry is supporting improvements in healthcare services. Simple changes to the provision of hospital services had made marked improvements in prevention, diagnosis, treatment and outcomes. These commitments can take time to implement but without these, patients would not be able to fully benefit from technological improvements.

Often innovation is viewed as an added expense to healthcare. However, improving how health conditions are managed can prevent hospital admissions and further complications which increase costs and reduce quality of life. This could include developing new models of care and monitoring or sharing expertise to improve workflow, including the growing use of digital and artificial intelligence solutions.



© 2022 Sandpiper Health. All rights reserved.

BEIJING

Suite 1105, Full Tower,
No. 9 Middle East 3rd Ring
Road, Beijing, PRC
+86 10 8591 0056

HONG KONG SAR

21/F, The Workstation,
43 Lyndhurst Terrace,
Central, Hong Kong SAR
+852 3114 6339

NEW ZEALAND

2/200 Market Street
North, Hastings, Hawke's
Bay, New Zealand
+64 21 0844 0939

SHANGHAI

1229 Century Avenue, 6/F,
Tower 1, Century Metropolis,
Shanghai, 200122
+86 15507577095

SINGAPORE

#21-02, Prudential Tower,
30 Cecil Street, Raffles
Place, Singapore 049712
+65 6971 1099

SYDNEY

Level 4, 71 Walker Street,
North Sydney NSW 2060,
Australia
+612 9939 8220