

Advancing Universal Health Coverage for NCD Care: Industry Contributions through Access Accelerated

INTRODUCTION

Universal health coverage (UHC) has become an increasingly powerful common cause in global health as countries around the world seek to bring quality care to more of their populations, while protecting them from financial hardship. UHC is a cornerstone of the United Nations (UN) Sustainable Development Goals (SDGs), and as a central priority in its current general program of work, the World Health Organization (WHO) has committed to achieving UHC for 1 billion people by 2023.ⁱ

The [World Health Organization](#) defines UHC as:

- 1) **Equity in access** to health services - everyone who needs services should get them, not only those who can pay for them;
- 2) The **quality** of health services should be good enough to improve the health of those receiving services and;
- 3) People should be **protected against financial risk**, ensuring that the cost of using services does not put people at risk of financial harm.

Each year, more and more countries from all regions and income levels are committing to this goal,ⁱⁱ and 2019 marks a key milestone in this journey, with the convening of a UN High-Level Meeting on UHC on September 23. The meeting, ‘Universal Health Coverage: Moving Together to Build a Healthier World’, brings together all 193 UN Member States, including heads of state, political and health leaders, policy-makers, and UHC champions to advocate for health for all. The resulting Political Declaration, negotiated by Member States and endorsed by Heads of State, will form the foundation for future global efforts toward UHC.

To achieve the ambition to provide “health for all,” however, much work must be done. We must bridge persistent gaps in health care coverage and address evolving challenges – such as the rising burden of non-communicable diseases (NCDs) in low- and middle-income countries (LMICs). These complex issues require holistic solutions, breaking down barriers in the global health community by disease or by sector. It is urgent that we find new ways to bring together resources and knowledge across diverse stakeholders to form new collaborative approaches and partnerships that advance our common vision of improved health and wellbeing through UHC.

Our Commitment

Launched in 2017, Access Accelerated brings together more than 20 global biopharmaceutical companies to work with country governments, civil society, multilaterals and NGOs to address the growing global burden of NCDs. For the first time, the biopharmaceutical industry has united around a bold commitment to help achieve the ambitious agenda laid out in the UN SDGs to reduce premature deaths from NCDs by one-third by 2030.

Our approach is anchored in growing global and local momentum to achieve UHC; effectively addressing NCDs is foundational to achieving UHC and crucial to realizing the SDGs. As the growing burden of NCDs continues to put pressure on local health systems’ ability to ensure its people can access equitable, high-quality and affordable health care, Access Accelerated is mobilizing the collective capacity of the biopharmaceutical industry and its partners to address this challenge through our NCD initiatives.

“All roads lead to universal health coverage – and this is our top priority at WHO. For me, the key question of universal health coverage is an ethical one. Do we want our fellow citizens to die because they are poor? Or millions of families impoverished by catastrophic health expenditures because they lack financial risk protection? Universal health coverage is a human right.”¹

– Dr. Tedros Adhanom Ghebreyesus, Director General of the World Health Organization

Our Work in Context: NCDs and UHC

In working alongside our membership, partner organizations, country governments, people living with NCDs (PLWNCDs) in LMICs, and other key stakeholders, one imperative has become overwhelmingly clear: our approach to NCDs must be aligned with and anchored in global momentum to achieve UHC.

Progress on NCDs requires UHC

We understand that sustainable access to NCD prevention, treatment and care requires UHC; and conversely, that accelerating progress in NCD services is a critical component to build effective UHC systems.

- **An integrated, whole-health approach is needed for NCDs.** NCDs cannot be addressed in isolation. Many major NCDs share risk factors; PLWNCDs often have more than one condition, or diseases such as tuberculosis and HIV/AIDS.ⁱⁱⁱ In the era of the Millennium Development Goals (MDGs), vertical health interventions targeted key infectious diseases such as HIV, tuberculosis and malaria. To bring progress forward towards the SDGs, we must approach our work on NCDs as part of an integrated, comprehensive set of health services.^{iv}
- **NCD health spans the human lifecourse.** Effective NCD prevention, treatment and care requires health systems to provide essential services from infancy through old age.^v Exposure to risk factors for NCDs occurs throughout all stages of life, and conditions are often chronic and lifelong. PLWNCDs often require multiple and ongoing interactions with the health systems over their lives, including disability and palliative care.^{vi} In this aspect, building on existing infrastructure and learnings from HIV prevention and care will be critical to expanding access to robust NCD services.^{vii}
- **Financial protection is essential for people living with NCDs.** Over 60 percent of PLWNCDs have experienced catastrophic health expenditure, and being uninsured increases the risk of high out-of-pocket costs.^{viii} The high cost of NCD-related healthcare and the reduced productivity of patients leads to a loss of household income, trapping people in a cycle of poverty and limiting social and economic development. Overall, it is estimated that NCDs will cost LMICs \$21 trillion USD over the next three decades, posing a significant threat to the achievement of the SDGs.^{ix}

“If countries choose to invest in making progress towards universal health coverage, they lay the foundation for making progress towards all the other health targets and other goals – like ending poverty, improving gender equality, decent work and economic growth, and more.”¹

– Dr. Tedros Adhanom Ghebreyesus, Director General of the World Health Organization

Building a Collaborative Response

Through conversations with our local partners, and in alignment with global frameworks and dialogues, we are drawing on the following learnings to inform how we implement our vision.

We must align to support local needs and priorities

We recognize UHC is a journey for which there is no one-size-fits-all approach; individual LMICs will determine what it means for them based on their own historical, economic, and social context.^x It is critical that we – along with all other stakeholders – seek out and align with country-level leadership, commitment, and collaboration on NCDs.

- **The expansion of NCD services through UHC is driven locally.** We recognize the primary role and responsibility of governments at all levels in responding to the challenge of NCDs.^{xi} Multi-stakeholder partnerships for health must seek to address both local and national health priorities and contribute meaningfully to broader NCD efforts, as defined by policymakers.
- **Understanding and responding to the needs of PLWNCDS is critical.** UHC and health systems must be people-centered; the involvement of PLWNCDS in health system processes and governance is necessary to achieving UHC. PLWNCDS have a critical role in driving action at a local level – to help set priorities, identify gaps, and offer solutions that are contextually appropriate.^{xii}

How Access Accelerated is Responding

Access Accelerated is focusing its collective efforts in a set of initial priority LMICs, our Focus Countries – Kenya, Ghana, and Vietnam. In these countries, we are piloting a new approach to coordinate across our members and partners towards a common goal: integrating our response to NCDs under local UHC efforts.

- **Amplifying the priorities of PLWNCDS:** Access Accelerated is supporting local NCD Alliance chapters in developing country-level Advocacy Agendas for PLWNCDS for Kenya and Ghana, as part of the NCD Alliance Our Views, Our Voices initiative to elevate the priorities of PLWNCDS.
- **Aligning with national responses:** Access Accelerated is engaging with Focus Country governments to support local and global processes for inclusive and evidence-based multi-sectoral policy dialogue and action on NCDs. In this way, we can understand priorities and challenges in expanding access to NCD care, how NCD care is being integrated into national plans for UHC, as well as the role that multi-stakeholder partnerships can play in advancing progress and, in particular, what the biopharmaceutical industry can do in this context as a solutions oriented partner.

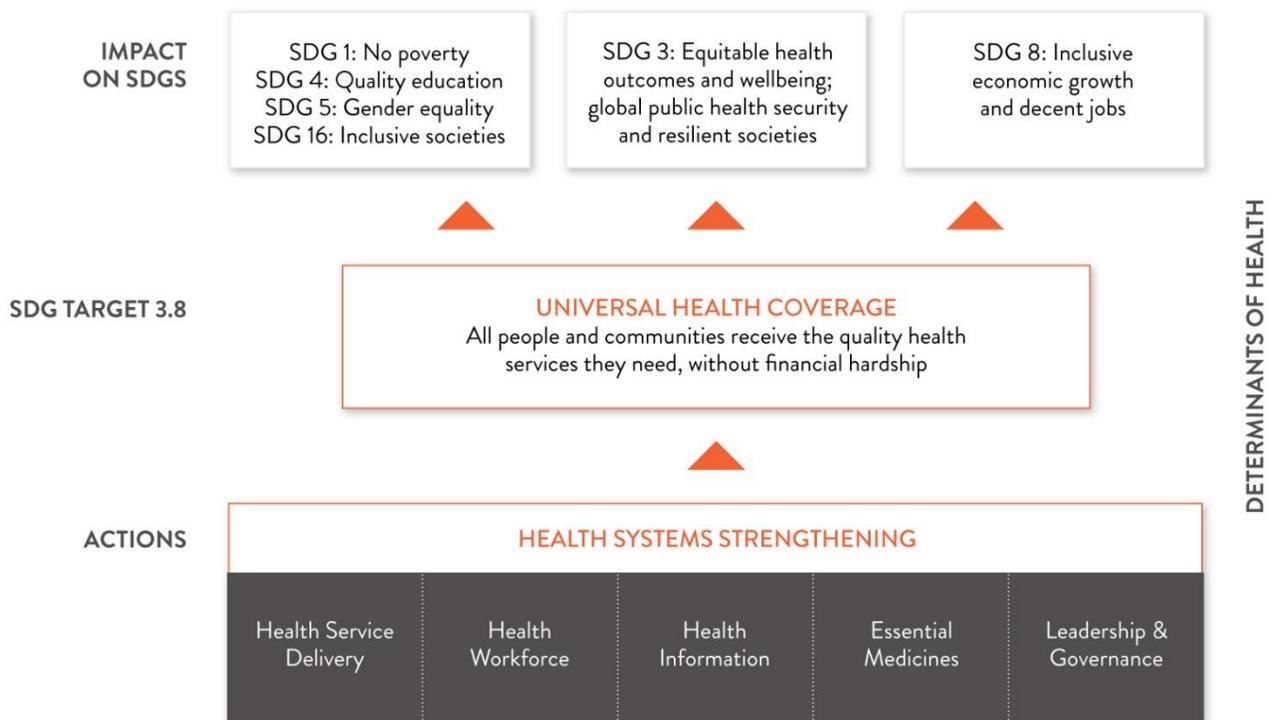
There is much work to be done to strengthen health systems

There are significant gaps in existing health service delivery systems, challenging sustainable, universal access to care for NCDs. Progress towards UHC will require integrated action across the entire health system, including resourcing, strengthening health infrastructure and delivery, ensuring access to quality medicines, improving health literacy and reshaping the health workforce.

- **We cannot afford to work in silos.** True access to affordable, quality healthcare requires that all elements of a functioning health system be in place. We must look for breakdowns and gaps across all areas of the WHO's building blocks for strengthening health systems. In

introducing new NCD services, we must not start from scratch or work in isolation; we will achieve efficient, scalable solutions by integrating new services into existing delivery systems for issues such as HIV, maternal healthcare, and immunization.

- **Comprehensive, integrated primary care services are essential.** Quality primary health care represents the most critical priority in developing UHC systems and is required to achieve sustainable, equitable access. Integration of NCD services at this level will require health workers who have skills that match health needs, are motivated, and are available in the right quantity at the right places.^{xiii}
- **There are significant gaps in the data and evidence needed for an effective, efficient NCD response.** There is a need to challenge health systems and programs to assess progress based on the results they deliver to people by gathering and analyzing robust health data. Reliable evidence of actual health needs, alongside the supply and demand for and supply of health services, informs stronger policies, programs and overall financing, making UHC possible.^{xiv}



Access Accelerated is supporting targeted, catalytic investments across health systems in line with local and global UHC and NCD priorities:

Health Service Delivery	<ul style="list-style-type: none"> • Advancing integrated primary health care: Access Accelerated is supporting a targeted project to pilot models for integrated NCD services at the primary care and community levels, in collaboration with the World Bank and expert local partners in Kenya (AMPATH) and Vietnam (PATH). By expanding health workforce capacity, these pilots build on existing infrastructure and care delivery mechanisms for infectious disease and maternal/child health care to expand access to critical NCD prevention, treatment and care.
Health Workforce	
Health Information	<ul style="list-style-type: none"> • Building evidence for policy: Through Access Accelerated’s partnership with the World Bank, Ghana and Colombia have requested support for much-needed research and population-based studies on the prevalence of NCDs and NCD risk factors, informing the development of targeted policies and follow-on World Bank loans to fund extended access to NCD services.
Essential Medicines	
Health Financing	<ul style="list-style-type: none"> • Identifying & targeting key areas of opportunity: Access Accelerated seeks catalytic, transversal investments across health systems, focusing on areas where there are opportunities to draw on industry expertise, experience, and assets. Two key areas – supply chain strengthening and digital health – have emerged as early priorities, and are currently being analyzed in Focus Countries to identify potential areas for impactful engagement.
Leadership and Governance	

“We are convinced that strengthening primary healthcare is the most inclusive, effective, and efficient approach to enhance people’s physical and mental health, as well as social well-being, and that primary healthcare is a cornerstone of a sustainable health system for universal health coverage.”

–Declaration of Astana, 2018

The **biopharmaceutical** industry has a clear role to play in supporting UHC.

Collaboration offers effective mechanisms to mobilize human and financial resources, expertise, technology, and knowledge, promoting long-term sustainability and flexibility in meeting UHC objectives.^{xv}

- **UHC requires a collaborative response from all stakeholders.** Systems-level changes needed to address the growing burden of NCDs require a multi-sectoral approach. Governments alone cannot achieve UHC; UHC requires innovation and collaboration among all relevant sectors of society including academia, health care providers, PLWNCDs, NGOs and the private sector.^{xvi} Meaningful collaboration among all stakeholders will allow us to pool a diversity of resources, knowledge, and experience.
- **Multi-sectoral partnerships have played a critical role in past global health advances.** Global experiences to date demonstrate that genuine, effective, and durable multi-

sectoral partnerships can play an important role in supporting country-driven strategies. Significant advances have been driven by multi-sectoral efforts such as the Drugs for Neglected Diseases initiative; the Medicines for Malaria Venture; financing mechanisms such as the Global Fund to Fight AIDS, Tuberculosis and Malaria and Gavi; and the Coalition for Epidemic Preparedness Innovations, the AMR Industry Alliance, Uniting to Combat NCDs, and others.

- **The private sector has important expertise and solutions to contribute to efforts on UHC and NCDs.** From innovation in the lab to the cutting edge of care delivery, the private sector can bring to bear expertise, novel solutions and other resources necessary to transform health systems and spur progress on complex health challenges. As an industry, we recognize that we have a critical role to play in strengthening health systems around the world and must do our part to support solutions that better address the needs of PLWNCDS.

Access Accelerated is committed to **optimizing engagement and setting a gold standard for impact and rigor in public-private partnerships.**

- Fostering synergies amongst industry initiatives on NCDs, and identifying opportunities for industry initiatives to contribute to health systems strengthening, beyond funding – fully leveraging industry expertise, experience, and assets:
 - In 2018, we launched the [Access Accelerated Open Platform](#). This innovative interactive resource allows users to navigate across current biopharmaceutical industry initiatives on NCDs and is intended to enhance opportunities for future collaboration.
- Measuring results across our NCD initiatives and sharing learnings from its partnerships:
 - Boston University’s independent [Access Observatory](#) publishes annual reports on Accelerated program information and data, based on reporting from our member companies.
 - In 2019, we published [Access Accelerated in Action: Key Learnings in Programme Design & Implementation](#), a report on our members’ experiences in NCD initiatives to date. The report presents a series of case studies, extracting successes and lessons learned to inform future program development.

“For locally relevant innovations to take off, we need new business models that bring together donors and impact investors, governments, NGOs, and the private sector.... Moving the needle on UHC will require that public and private players share innovative ideas and form durable partnerships.”¹

– Dr. Githinji Gitahi, CEO of Amref Health Africa and Co-chair of the UHC2030 Steering Committee

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REFERENCES

- ⁱ World Health Organization '13th General Program of Work', 2018 http://apps.who.int/gb/ebwha/pdf_files/WHA71/A71_4-en.pdf?ua=1
- ⁱⁱ "Global Compact." UHC2030. Accessed August 21, 2019. <https://www.uhc2030.org/our-mission/global-compact/>.
- ⁱⁱⁱ Hajat, Cother and Sandeep P Kishore. "The case for a global focus on multiple chronic conditions." *BMJ global health* vol. 3,3 e000874. 22 Jun. 2018, doi:10.1136/bmjgh-2018-000874.
- ^{iv} UHC2030. "Healthy Systems for Universal Health Coverage: A Joint Vision for Healthy Lives." *Healthy Systems for Universal Health Coverage: A Joint Vision for Healthy Lives.*, 2018.
- ^v Mikkelsen, Bente, Julianne Williams, Ivo Rakovac, Kremlin Wickramasinghe, Anselm Hennis, Hai-Rim Shin, Mychelle Farmer, et al. "Life Course Approach to Prevention and Control of Non-Communicable Diseases." *BMJ (Clinical Research Ed.)* 364 (January 28, 2019): l257. <https://doi.org/10.1136/bmj.l257>.
- ^{vi} NCD Alliance. "Ensuring Healthy Lives for All: NCDs and UHC." Accessed August 5, 2019. <https://ncdalliance.org/resources/ensuring-healthy-lives-for-all-ncds-and-uhc>.
- ^{vii} Nishtar, Sania. "Non-Communicable Diseases Must Be Part of Universal Health Coverage - The BMJ." Accessed August 21, 2019. <https://blogs.bmj.com/bmj/2018/05/22/sania-nishtar-non-communicable-diseases-must-be-part-of-universal-health-coverage/>.
- ^{viii} Jan, Stephen, Tracey-Lea Laba, Beverley M. Essue, Adrian Gheorghe, Janani Muhunthan, Michael Englgau, Ajay Mahal, et al. "Action to Address the Household Economic Burden of Non-Communicable Diseases." *Lancet (London, England)* 391, no. 10134 (19 2018): 2047–58. [https://doi.org/10.1016/S0140-6736\(18\)30323-4](https://doi.org/10.1016/S0140-6736(18)30323-4).
- ^{ix} Bloom, David E., Elizabeth Cafiero, Eva Jané-Llopis, Shafika Abrahams-Gessel, Lakshmi Reddy Bloom, Sana Fathima, Andrea B. Feigl, Tom Gaziano, Ali Hamandi, and Mona Mowafi. "The Global Economic Burden of Noncommunicable Diseases." *Program on the Global Demography of Aging*, 2012.
- ^x World Health Organization. [Tokyo Declaration on UHC](https://www.who.int/universal_health_coverage/tokyo-declaration-uhc.pdf), UHC Forum 2017, page 2. 2017. Available at https://www.who.int/universal_health_coverage/tokyo-declaration-uhc.pdf. Accessed August 5, 2019.
- ^{xi} United Nations. "Political Declaration for the 2018 High-Level Meeting on NCDs." Available at https://www.un.org/en/ga/search/view_doc.asp?symbol=A/RES/73/2. Accessed August 5, 2019.
- ^{xii} NCD Alliance. "Ensuring Healthy Lives for All: NCDs and UHC." Accessed August 5, 2019. <https://ncdalliance.org/resources/ensuring-healthy-lives-for-all-ncds-and-uhc>.
- ^{xiii} Organization, World Health. "Healthy Systems for Universal Health Coverage: A Joint Vision for Healthy Lives." *Healthy Systems for Universal Health Coverage: A Joint Vision for Healthy Lives.*, 2018.
- ^{xiv} Organization, World Health. "Healthy Systems for Universal Health Coverage: A Joint Vision for Healthy Lives." *Healthy Systems for Universal Health Coverage: A Joint Vision for Healthy Lives.*, 2018.
- ^{xv} United Nations. General Assembly resolution 70/1: Addis Ababa Action Agenda of the Third International Conference on Financing for Development, A/RES/69/313, p. 22. 2015. Available at http://www.un.org/en/ga/search/view_doc.asp?symbol=A/RES/69/313. (accessed 15 April 2019).
- ^{xvi} United Nations. General Assembly resolution 70/1: Addis Ababa Action Agenda of the Third International Conference on Financing for Development, A/RES/69/313, p. 4. 2015. Available at http://www.un.org/en/ga/search/view_doc.asp?symbol=A/RES/69/313. (accessed 15 April 2019).