YEAR 3 REPORT
2019

Transforming Private Sector Engagement to Accelerate the Global Response to Non-Communicable Diseases
At the time of publication for the Access Accelerated Year 3 report, the COVID-19 pandemic is devastating communities and testing the resilience of health systems around the world.

Everyone at Access Accelerated is focused on all those affected. We stand by the health workers and responders who are courageously putting themselves at risk to treat patients. We are proud to see Access Accelerated member companies rise to the challenge to support the global response and race to develop treatments and safe, effective vaccines.

This public health emergency underscores the importance of building resilient health systems that can adapt to manage health crises, while continuing to address the ongoing health needs of the populations they intend to serve, including people living with non-communicable diseases (NCDs). We recognize that the investment in infrastructure, policy and capacity needed to manage infectious diseases can also support the response to chronic conditions, and ultimately, will help people live healthier lives.

While NCD prevention, treatment and care remains at the heart of Access Accelerated and this annual report captures our 2019 activities and impact, the global impact of COVID-19 is not lost on us. Our commitment to strong, resilient systems remains in service of a healthier future for all, during this difficult time and in the years to come.
# TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>Page</th>
<th>Section</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>LETTER FROM THE CEOS</td>
</tr>
<tr>
<td>4</td>
<td>EXECUTIVE SUMMARY</td>
</tr>
<tr>
<td>6</td>
<td>OUR JOURNEY</td>
</tr>
<tr>
<td></td>
<td>2019 IN REVIEW</td>
</tr>
<tr>
<td>9</td>
<td>The NCD Landscape: A Changing Paradigm</td>
</tr>
<tr>
<td>10</td>
<td>Our Strategy</td>
</tr>
<tr>
<td>11</td>
<td>Strategic Framework</td>
</tr>
<tr>
<td></td>
<td>ACTIONS &amp; ACHIEVEMENTS</td>
</tr>
<tr>
<td>13</td>
<td>At-A-Glance</td>
</tr>
<tr>
<td>14</td>
<td>Global Perspectives, Multisector Voices</td>
</tr>
<tr>
<td>16</td>
<td>Informing Health Policies</td>
</tr>
<tr>
<td>18</td>
<td>Accelerating Investment</td>
</tr>
<tr>
<td>20</td>
<td>Advancing Partnership</td>
</tr>
<tr>
<td>22</td>
<td>Measuring our Contributions</td>
</tr>
<tr>
<td></td>
<td>COLLABORATING FOR IMPACT</td>
</tr>
<tr>
<td>25</td>
<td>Scaling Solutions</td>
</tr>
<tr>
<td>26</td>
<td>Supply Chain</td>
</tr>
<tr>
<td>27</td>
<td>Digital Health</td>
</tr>
<tr>
<td>29</td>
<td>Primary Care</td>
</tr>
<tr>
<td></td>
<td>REFLECTIONS</td>
</tr>
<tr>
<td>31</td>
<td>Lessons Learned</td>
</tr>
<tr>
<td>32</td>
<td>Message from the Director</td>
</tr>
<tr>
<td>33</td>
<td>Citations &amp; Acknowledgements</td>
</tr>
</tbody>
</table>
In the Access Accelerated Year 3 report, we reflect on the global burden of NCDs in 2019 and our efforts to improve care for people in low- and middle-income countries (LMICs). As 2020 began, however, the world also faced the emergence of a novel coronavirus. With this public health emergency, we are reminded of the critical need to foster resilient health systems that can meet the demands of infectious and chronic diseases alike.

LETTER FROM THE CEOS

There is an urgent need for all sectors to work together to accelerate solutions that strengthen health systems so that we can respond to public health crises and continue to provide quality care for chronic conditions. A steadfast commitment to partnership is what inspired the launch of Access Accelerated in 2017 and what continues to motivate our work today.

Individually, each member company brings deep knowledge and diverse experiences to the table. Our multi-disciplinary expertise spans a wide range of therapeutic areas and our collective insights stem from more than 100 public health programs that we operate around the world.

Yet the complex, systemic barriers that hinder NCD control demand a radically different response. To truly effect long-term and sustainable progress, we must combine our individual strengths and work together—both across our industry and with other sectors. Through Access Accelerated, our companies came together in an unprecedented way, and we are setting a new standard for public-private partnerships.

In our first three years, we worked collaboratively with the World Bank Group, City Cancer Challenge (C/Can), NCD Alliance, PATH and World Heart Federation to test innovative partnership models, support the production of data and evidence to inform health policies, and catalyze investment in NCDs.

This report shares results from the past three years and outlines how these learnings are informing our approach for the future. At a high-level:

- Our partnership with the World Bank has catalyzed a scale up of funding for NCDs, with the World Bank now leading a $5.5 billion dollar NCD portfolio that is driving sustainable solutions in 33 countries.

- During the first United Nations High-Level Meeting on Universal Health Coverage (UHC), we supported the global commitment to keep NCDs on the agenda because we know that NCDs cannot be addressed without UHC.

- In 2019, we began work with PATH and the Ministry of Health in Vietnam to scale a successful hypertension prevention and management pilot that ran from 2016–2018 to reach all of Vietnam and to include diabetes and eventually other NCDs.

- A national Cancer Law was enacted in Paraguay in 2019, a milestone resulting from City Cancer Challenge efforts to bring together public and private sector partners to make cancer a national priority.

- Our partnership with the NCD Alliance helps us amplify voices and perspectives of people living with NCDs. Our collaboration supported the development of an advocacy agenda for people living with NCDs in both Ghana and Kenya.
In 2019, we continued to make progress toward our commitment to more transparent and comprehensive measurement of our programs. Through our partnership with the Access Observatory, we are tracking our impact against specific indicators such as reduced burden of disease and increased health system capacity.

As we start our fourth year in the context of the unprecedented COVID-19 crisis, Access Accelerated will continue to lead by example, building on successes and learning from setbacks, and working to mitigate the pandemic’s impact on people living with NCDs.

We are doing the often-challenging work of identifying and launching new collaboration models—with each other, with implementing partners and with governments. We know we can always do more to leverage our complementary strengths, enhance coordination at the local level and create the kind of long-term, sustainable programs that can scale to reach even more people.

Collaboration at scale demands an investment of both time and trust. We thank our partners for working hand-in-hand with Access Accelerated, sharing insights and helping us move from talk into action. We believe in the power of partnership and working together towards a future where all people have access to quality NCD prevention, treatment and care.
In the three years since the initiative’s launch, Access Accelerated has progressed and evolved in service of the commitment we made to help achieve the SDGs, particularly, the target to reduce premature deaths from NCDs by one-third by 2030. We are finding new ways of working together as an industry and across sectors, and pursuing sustainable solutions through partnerships that address systems-level barriers to care. For LMICs specifically, limited resources and complex, systemic barriers to care place a burden on policymakers, health workers, and most importantly, people, that require collaboration from everyone to solve. At Access Accelerated, we address these challenges by informing health policies, accelerating public and private investment and advancing meaningful partnerships:

- Inform Health Policies: As governments develop the policies that will shape health systems for the future, it is vital that their vision, budgets and resources consider—and prepare—for the growing burden of NCDs. Gaps in evidence around access to quality NCD prevention, treatment and care can be a challenge for governments as they work to build responsive, comprehensive policies. We are working with partners to implement data-driven solutions that support country governments in policy and decision-making on NCDs.
• **Accelerate Investment**: Effective NCD prevention, treatment and care will also require countries to invest more across their health systems. Research conducted by the World Health Organization (WHO) has shown that countries experience significant positive return on investment when they take action to address NCDs. Access Accelerated is working to identify the most effective channels for unlocking public and private funding.

• **Advance Partnership**: Access Accelerated advances meaningful partnerships because the scale and complexity of NCDs and global ambitions to provide “health for all” demands it. Individually, each Access Accelerated member company has a legacy of public health programs, knowledge and experience. By working together through innovative partnership models, we can combine individual strengths for greater collective impact.

In 2019, our 28 member companies and trade association members continued to drive impact through company-run public health programs. The biopharmaceutical sector has proven an ability to develop innovative and effective solutions that go beyond product donations and philanthropy, and Access Accelerated draws on the sector’s expertise across disease states, research and development on treatments and cures, and experience working with other actors to support innovative financing mechanisms.

This expertise and six cross-cutting principles guide the work we do as an initiative and how we operate in our three focus countries Kenya, Ghana and Vietnam:

- Patient-centered approach
- Strong local ownership and engagement
- Substantive partnerships
- Sustainable and equitable solutions
- Innovation and continuous learning
- Rigorous measurement and transparency

Our continued partnerships with C/Can, NCD Alliance, PATH, the World Bank Group and World Heart Federation are also instrumental in fostering evidence-based decision-making so that policymakers have the critical information they need to address NCDs and build stronger health systems.

For example, with C/Can, we supported cities in adopting a multi-disciplinary approach to cancer care where specialists (diagnostic, treatment and supportive care) all work together to decide on the best treatment option for each patient. We supported the NCD Alliance to launch an Our Views, Our Voices Train-the-Trainer program to equip people living with NCDs with advocacy skills to leverage their lived experiences. Through our partnership with the World Heart Federation, we supported the dissemination and uptake of Kenya’s National Guidelines for Cardiovascular Disease Management and in Ghana, our work with the World Bank supported technical committees under the Ministry of Health to complete the national NCD strategy in 2019. Through our Communities for Healthy Vietnam program, we worked with PATH and the Ministry of Health in Vietnam to scale a successful hypertension prevention and management pilot that ran from 2016–2018. In 2019, 10,000 people were screened, and 5,000 people living with hypertension and 1,000 people living with diabetes were linked to care.

As we enter into our fourth year, we will build on the great strides we have made and the deep network of relationships we have built in Kenya, Ghana and Vietnam, to focus on three areas where we know the private sector can help foster sustainable solutions: supply chain, digital health and primary care.

As our member company CEOs pledged when our initiative began three years ago, Access Accelerated will be guided by what people need, delivered by aligned individual efforts and accelerated by broad dynamic partnerships. Together, we can help people, no matter where they live, to enjoy longer, healthier lives.
ON 17 JANUARY 2017 AT THE WORLD ECONOMIC FORUM, 22 LEADING BIOPHARMACEUTICAL COMPANIES LAUNCH ACCESS ACCELERATED PARTNERSHIP WITH THE WORLD BANK ESTABLISHES A PORTFOLIO OF INTEGRATED NCD PILOT PROJECTS IN KENYA, VIETNAM AND EL SALVADOR TO INFORM NATIONAL SCALE-UP AND SERVE AS AN ENTRY POINT FOR INNOVATIVE FINANCING FOR NCDs

**First disease-specific partnership begins with City Cancer Challenge Foundation (C/Can), an initiative originally launched by the Union for International Cancer Control.***

An independent measurement framework, the Access Observatory, is developed by Boston University’s School of Public Health

Four C/Can Key Learning Cities are announced: Asunción, Paraguay; Cali, Colombia; Yangon, Myanmar and Kumasi, Ghana

**27 member company programs are launched or extended across 15 countries in 2017**

**Access Accelerated initiates a partnership with NCD Alliance to meaningfully involve people living with NCDs**

Access Observatory releases first annual report, “Results and Reflections on Year One”

**In Colombia, the World Bank supports a comorbidity study for policy makers to understand impact of NCDs on broader health system**

At the stakeholder meeting known as “Naivasha II,” Access Accelerated, Kenya’s Ministry of Health and the World Bank launch pilot NCD programs and chart a roadmap toward SDG 3.4 and the UN High-Level Meeting on NCDs

PATH conducts co-creation workshops, interviews and focus groups in Kenya to build the NCD Navigator, a dynamic tool that empowers the Ministry of Health with data to direct strategy execution and resource allocation in Kenya

Kumasi, Ghana joins C/Can as the last Key Learning City. Porto Alegre, Brazil and Kigali, Rwanda are selected to join C/Can as Challenge Cities

The World Bank supports the government of El Salvador in piloting an integrated health care service delivery model for cervical cancer, diabetes and kidney disease in three regions

NCD Alliance and the Ghana NCD Alliance host a two-day national workshop in Ghana to discuss needs and recommendations of people living with NCDs

**Member companies introduced or extended 40 company programs in 2018—bringing Access Accelerated total to 90 active initiatives in 99 countries**

* C/Can became a standalone foundation in January 2019

**OUR JOURNEY**

In 2017, more than 20 biopharmaceutical companies joined forces to accelerate progress in the fight against NCDs. Together, we inform health policies, accelerate public and private investment and co-create meaningful partnerships so that people around the world live healthier lives.

Over the course of our first three years, we partnered with patients, advocates, NGOs, governments and multinational organizations to improve access to NCD care.
Access Accelerated returns to Kenya for annual meeting in Naivasha to reengage stakeholders on how to advance Kenya’s NCD policy in the context of the UHC agenda.

Ipsen and Servier join Access Accelerated as new member companies.

At the 72nd World Health Assembly, Access Accelerated examines how to make partnership models more effective to support UHC.

Access Observatory releases its second annual report, “Establishing the Foundation for Shared Learning.”

Access Accelerated publishes “Access Accelerated in Action: Key Learnings in Program Design & Implementation.”

The World Heart Federation convenes a roundtable of 40 leaders to develop targeted action plans for the prevention and treatment of hypertension in Vietnam.

Tbilisi, Georgia is selected to join C/Can as a Challenge City. Leon, Mexico and Greater Petaling, Malaysia are also selected to join C/Can.

On the margins of the United Nations General Assembly, Access Accelerated convenes global stakeholders to examine the role of public-private partnerships in closing gaps in access to NCD services.

The NCD Alliance launches the Our Views, Our Voices Train-the-Trainer program with people living with NCDs and national/regional NCD Alliance representatives from 8 countries/regions.

NCD Alliance and Ghana NCD Alliance release the Ghana Advocacy Agenda of People Living with NCDs, calling on the government to take action on financing and access.

At the Tokyo International Conference on African Development, Access Accelerated advances dialogue on prioritizing NCD prevention and control in UHC.

PATH and Access Accelerated complete a “Journey of the Pill” assessment in Kenya to identify strengths and inefficiencies in the supply chain. Assessment also launches in Ghana.

Member companies introduced or extended 17 company programs—bringing the Access Accelerated total to 107 active company programs in Access Accelerated 136 countries.

PATH launches NCD Navigator version 2.0 in Kenya with data collected from 89% of all counties, 79 organizations and the Ministry of Health.

In Cali, Colombia, C/Can supports Valle del Cauca in adopting a multisectoral cancer control plan.

In Kenya, the World Heart Federation disseminates and monitors the uptake of the new National Guidelines for Cardiovascular Disease Management.

The World Bank and the National Health Commission of China convene experts and government officials to share experiences with people-centered integrated care.

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2019 IN REVIEW

Ghanaian mental health advocate, Martha Coffie, and her mother.
NCDs remain a major challenge, accounting for 71% of all deaths globally. As evidenced by the WHO 13th General Program of Work, which lays out the organization’s five-year strategic plan, concerted action on NCDs remains a priority on the global agenda. The transformative movements, bold commitments and inclusive dialogues that took place in 2019 laid important groundwork for Access Accelerated to pursue deeper, more sustainable multisector impact on NCDs. In 2019:

- The importance of country-led responses to the NCD crisis echoed through the NCD investment cases completed by WHO and the United Nations Development Program (UNDP). The initial set of cases were carried out in 14 countries to help quantify the costs of NCDs, assess the benefits of action and catalyze multisectoral action in United Nations Member States.

- A landmark Political Declaration on UHC was adopted at the first United Nations High-Level Meeting on UHC in September 2019. Leaders from all 193 UN Member States committed to advance primary health care, strengthen health workforces and infrastructure, and ensure adequate domestic public spending on health. This unprecedented commitment made on the global stage signals a necessary paradigm shift is underway to view health care as a valuable investment rather than a cost.

- The great potential of partnerships was also elevated as the public and private sectors came together to increase their investments. The global, multisectoral Coalition for Access to NCD Medicines & Products continued to provide technical support, advocacy, and resource mobilization to increase access to NCD medicines and products. Also, in November 2019, Norway became the first country to launch an NCD strategy as part of its international development assistance.

- Innovation, through digital health in particular, remained at the forefront of solutions to tackle the NCD crisis and new health risks that have emerged. The global health community embraced breakthroughs—large and small—to bring communities closer to detecting, treating and managing NCDs.

As leaders act on the priorities outlined in the Political Declaration and chart their paths to achieve UHC, we recognize that there is no one-size-fits-all approach to reducing the burden of NCDs. For LMICs specifically, limited resources and complex, systemic barriers to care place a burden on policymakers, health workers, and most importantly, people. Improvements like stronger supply chains and greater data collection can help overcome the challenges that arise in low-resource settings, but these solutions require all stakeholders to prioritize treatment and care for those living with NCDs.

That is why Access Accelerated exists: to transform how the private sector accelerates global progress on NCDs. Our work to catalyze change, align resources and scale solutions are the steadfast pillars that will guide our strategic direction for years to come.
OUR STRATEGY

Access Accelerated is fueled by the belief that all people should have access to quality NCD prevention, treatment and care. Stronger public-private partnerships can make that belief a reality.

More than 20 member companies strong, Access Accelerated is the largest collective industry effort to address inequities in NCD care. We embrace collaboration as a way to maximize impact, while recognizing that partnerships must be nimble and efficient to solve a challenge as complex as NCDs. The power of Access Accelerated lies in our ability to bring the public and private sectors together, build trust and accountability by being responsive to local needs, and catalyze action that accelerates global progress on NCDs.

Our member companies have a long history of developing and implementing sustainable solutions that go beyond product donations and philanthropy by drawing on their expertise across disease states, innovative research and development, and business experience navigating complicated market access and financing dynamics. The combination of these insights from 20+ Access Accelerated member companies inform a holistic perspective on the systemic barriers that hinder access to care and the solutions that can result in lasting systemic change.

Access Accelerated is working to transform how the private sector can accelerate global progress on NCDs, while keeping people at the center of what we do.
VISION
A future where all people have access to quality NCD prevention, treatment & care

MISSION
Transforming how the private sector can accelerate global progress on NCDs

STRATEGIC GOALS
1 Impactfully Inform Local & Global Priority Health Policies
2 Accelerate Public & Private Investment in NCD Prevention, Treatment & Care
3 Optimize Engagement & Set a Gold Standard for Impact & Rigor in Public-Private Partnerships

PROGRAMS
NCD access programs of 20+ global biopharmaceutical member companies

PARTNERS
Leading global & local partners with complementary technical expertise

PLATFORMS
Collaboration, learning & digital platforms at the global, focus country & city levels

PRINCIPLES
- PEOPLE-CENTERED APPROACH
- LOCAL OWNERSHIP & ENGAGEMENT
- SUBSTANTIVE PARTNERSHIPS
- SUSTAINABLE, EQUITABLE SOLUTIONS
- INNOVATION & CONTINUOUS LEARNING
- RIGOROUS MEASURES & TRANSPARENCY

SDGS
SDG 3.4
By 2030, reduce by one-third pre-mature mortality from NCDs through prevention and treatment, and promote mental health and wellbeing

SDG 3.8
Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all.

SDG 17
Strengthen the means of implementation and revitalize the global partnership for sustainable development.
ACTIONS & ACHIEVEMENTS
AT-A-GLANCE

28 MEMBER COMPANIES AND TRADE ASSOCIATIONS

107 COMPANY PUBLIC HEALTH PROGRAMS ADDRESSING NCDS

136 COUNTRIES REACHED THROUGH MEMBER COMPANY PUBLIC HEALTH PROGRAMS

3 FOCUS COUNTRIES

GHANA
- BENEFICIARY POPULATION: 8.3M (2017–2019)*
  - Amplifying the voice of people living with NCDs alongside the Ghana NCD Alliance
  - Advancing country data on the prevalence of NCDs and their risk factors
  - Engaging multisectoral stakeholders in addressing cancer treatment and care

KENYA
  - Testing models of integrated NCD care at community and primary care levels
  - Closing bottlenecks and opening access in the supply chain
  - Advancing data-driven decisions through the NCD Navigator
  - Amplifying voices of people living with NCDs alongside the NCD Alliance of Kenya

VIETNAM
  - Scaling Communities for Healthy Vietnam, a successful hypertension prevention and management pilot
  - Strengthening primary health services with the Government of Vietnam and the World Bank
  - Advancing country data on the prevalence of NCDs and their risk factors
  - Engaging multisectoral stakeholders in addressing cancer treatment and care
  - Supporting NCD Alliance Vietnam in their consultation of people living with NCDs

5 IMPLEMENTING PARTNERS

*Disclaimer: these numbers are approximations based on the latest reporting figures from members, partners, and the Access Observatory.
With 107 total member company programs across 136 countries, the Access Accelerated model enables improved health outcomes at scale. In 2019, we worked across borders, sectors and siloes to respond to country priorities and meaningfully engage people living with NCDs in the decision-making process.

**COLOMBIA**

“Valle del Cauca is now an example for Colombia, establishing that cancer control requires meeting long and medium-term goals and improving the quality and organization of services and care.”

CAROLINA WIESNER CEBALLOS, DIRECTOR OF COLOMBIA’S NATIONAL INSTITUTE OF CANCEROLOGY

**GHANA**

“Is action on NCDs going to be all mere talk? Have we moved beyond talking about it to real actions? I wish to humbly add my voice to the call to action for SDG 3.4 which seeks to reduce premature mortality from NCDs, and 3.8 which seeks to achieve universal health coverage. The private sector can play a critical role in achieving these goals.”

DR. DENNIS LARYEA, MANAGER OF NCD CONTROL PROGRAM IN THE GHANA HEALTH SERVICE

**PARAGUAY**

“The Paraguayan government has now positioned cancer as a political priority at the national level, contributing to the approval of the first comprehensive cancer law, with funds allocated, which resulted in the reordering of the National Cancer Control Program in the National Cancer Institute (INCAN).”

SUSAN HENSHALL, C/CAN EXECUTIVE DIRECTOR
GHANA

“After being diagnosed with hypertension, I realized that this disease is a silent danger, so I decided to become a volunteer to share my knowledge with the people working here.”

MS. TAO, VOLUNTEER WITH THE COMMUNITIES FOR HEALTHY VIETNAM PROGRAM

KENYA

“For years, non-communicable diseases were associated with the rich, but this perception has changed and the government has promised to address funding in the supplementary budget.”

DR. JOSEPH KIBACHIO, HEAD OF THE DIVISION OF NCDS IN KENYA’S MINISTRY OF HEALTH

INDIA

“We must support governments in building a culture of health for all, that addresses NCD prevention, treatment and care, that includes palliative care, with no exception, no excuses.”

JYOTSNA GOVIL, OUR VIEWS, OUR VOICES ADVOCATE WITH THE NCD ALLIANCE

VIETNAM

“After being diagnosed with hypertension, I realized that this disease is a silent danger, so I decided to become a volunteer to share my knowledge with the people working here.”

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LEGEND
- Access Accelerated pilots, programs and focus countries
- Countries with active Access Accelerated Member Company programs
- City Cancer Challenge cities
Gaps in evidence around access to quality NCD prevention, treatment and care can be a challenge for governments as they work to build responsive, comprehensive policies. Recognizing this barrier to data-driven decision making, Access Accelerated asks: **How can we effectively bring evidence from our work and experience to help inform global and local health policies?**

The answer lies in knowledge-sharing and quality data collection, because data is more than numbers, it is actionable information that enables informed decision-making.

Through resources such as the NCD Navigator, we are creating a holistic, country-level view of NCD programming. Developed in collaboration with PATH and embedded within country governments, this dynamic mapping of NCD programs shows, for the first time, the scale of activities across a country with real-time data and visualizations. In 2019, we laid the groundwork to implement the NCD Navigator in Kenya. Data was collected from 42 Kenyan counties (89% of all counties) and 79 organizations, including the Ministry of Health, which provided program implementation data. Real-time data on NCD programming will help coordinate efforts and maximize impact, not only in Kenya where we are transitioning ownership to the Ministry of Health, but also in countries like Ghana where the NCD Navigator will be introduced in 2020.

In Ghana, we supported the World Bank’s work with the Ministry of Health and Ghana Health Service (GHS) to develop a NCD strategy that was completed in 2019. After Ghana’s Ministry of Health identified a lack of data on the NCD disease burden, the World Bank engaged the GHS, as well as people living with NCDs, to develop a survey using the WHO STEPwise methodology. This helped generate country data on the prevalence of NCDs and their risk factors, which informed the 2020–2025 national NCD policy and strategic plan.

In addition to expanding access to data in Kenya and Ghana, we are also supporting policy development in Colombia, working with officials in the Department of Valle del Cauca and the capital city Cali, to strengthen cancer control policies. In 2019, C/Can worked closely with Colombian government stakeholders like Dr. María Cristina Lesmes Duque, to impact regional and municipal public policy health agendas.

“We have managed to bring together more than 180 health professionals who worked together and a series of priorities were agreed on and we have begun implementing them,” Dr. Lesmes said, and the results are already evident. “We have funding to build a modern, self-sufficient oncology center. And a specific cancer control program has been created by the Departmental Assembly of the Valle del Cauca, a pioneer in the country. We are an example for Colombia about how to set public policy specifically on cancer.”

As governments develop the policies that will shape health systems for the future, it is vital that their vision, budgets and resources consider—and prepare—for the growing burden of NCDs.

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In addition to expanding access to data in Kenya and Ghana, we are also supporting policy development in Colombia, working with officials in the Department of Valle del Cauca and the capital city Cali, to strengthen cancer control policies. In 2019, C/Can worked closely with Colombian government stakeholders like Dr. María Cristina Lesmes Duque, to impact regional and municipal public policy health agendas.

“We have managed to bring together more than 180 health professionals who worked together and a series of priorities were agreed on and we have begun implementing them,” Dr. Lesmes said, and the results are already evident. “We have funding to build a modern, self-sufficient oncology center. And a specific cancer control program has been created by the Departmental Assembly of the Valle del Cauca, a pioneer in the country. We are an example for Colombia about how to set public policy specifically on cancer.”

As governments develop the policies that will shape health systems for the future, it is vital that their vision, budgets and resources consider—and prepare—for the growing burden of NCDs.

Gaps in evidence around access to quality NCD prevention, treatment and care can be a challenge for governments as they work to build responsive, comprehensive policies. Recognizing this barrier to data-driven decision making, Access Accelerated asks: **How can we effectively bring evidence from our work and experience to help inform global and local health policies?**

The answer lies in knowledge-sharing and quality data collection, because data is more than numbers, it is actionable information that enables informed decision-making.

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As urbanization rates continue to increase, cities have become testing grounds for innovative policies in a number of areas, including transportation and climate change. The leaders of C/Can saw an opportunity to test solutions for cancer care at the city-level, and with support from Access Accelerated, are now working in nine cities around the world to improve access to equitable, quality cancer care. One of these cities is Cali, Colombia, where C/Can supports both policy and implementation.

In Cali, we are seeing how deploying new resources into a community naturally leads to more local investments from the public and private sector alike. When these resources are used to fuel city innovation and leadership, the result can be transformative. C/Can calls this “the city multiplier effect,” also demonstrated by the HPV vaccination efforts in Cali.

In response to HPV in Cali, C/Can conducted a needs assessment of over 180 specialists. The Ministry of Health received the situation analysis report and endorsed a city action plan. The city took advantage of the momentum, the political will and commitment of all actors, public and private, to implement the reactivation of HPV vaccination. With support from C/Can and Access Accelerated member company, MSD, the city of Cali led the implementation of the strategy in 2018 and 2019. It resulted in a significant increase in HPV vaccination coverage in nine-year-old girls: 74.9% coverage in 2019 for the first dose (10% coverage average at national level), compared to 9.5% coverage in 2016 before C/Can’s arrival to Cali, according to data from the Secretary of Health.

In Colombia, C/Can and Access Accelerated are witnessing the impact of informing health policy on cancer care, and are building pathways and partnerships to support implementation.
Recognizing that less than two percent of the total development assistance for health was allocated to NCDs in 2018, Access Accelerated is steadfast in our commitment to accelerate public and private investment in prevention, treatment and care in LMICs. Our partnerships help move this forward. For C/Can, addressing the health financing challenges of cities is critical to achieving our shared vision of a world with quality, equitable cancer care for all. Effective NCD prevention, treatment and care will require countries to invest more across their health systems. According to the WHO, “for every US$1 invested in scaling up actions to address NCDs in low- and lower-middle-income countries, there will be a return to society of at least US$7 in increased employment, productivity and longer life.” Access Accelerated is working to identify the most effective channels for unlocking public and private funding to help LMICs bring this to fruition.

For example, in 2019 CHFL worked with regional experts to assess the financial and social return on investment in radiotherapy and nuclear medicine in Cali, Colombia’s public sector health system over the next 10 years. These efforts give cities the knowledge and resources to move beyond inadequate public financing and traditional philanthropy toward sustainable financing for their cancer solutions. Access Accelerated also helps make the case for investing in NCDs at a country level through our partnership with the World Bank. In Colombia, for example, supported a comorbidity study for policymakers to help them understand the impact of NCDs on the broader health system. This study opened the door to a policy dialogue and triggered investments that would help scale up NCD services, with a $200 million USD project in the works.

With support of Access Accelerated, C/Can’s City Health Financing Lab (CHFL) helps cities navigate the financial challenges of improving care and treatment by providing the tools they need to access new kinds of capital, including blended finance and public-private partnerships.

“Health spending is not a cost, it’s an investment in poverty reduction, jobs, productivity, inclusive economic growth and healthier, safer, fairer societies.”

DR. TEDROS ADHANOM GHEBREYESUS, WHO DIRECTOR-GENERAL
BY THE NUMBERS

UHC FINANCING GAP OF

$176 BILLION

IN 54 OF THE WORLD’S POOREST COUNTRIES BY 2030

PEOPLE IN DEVELOPING COUNTRIES SPEND
HALF A TRILLION DOLLARS ANNUALLY—

OVER $80 PER PERSON—

OUT OF THEIR OWN POCKETS TO ACCESS
HEALTH SERVICES

COUNTRIES MUST INVEST

AT LEAST 1% MORE

OF GDP ON PRIMARY
HEALTH CARE TO ELIMINATE
COVERAGE GAPS

ACROSS LOW INCOME COUNTRIES,
THE AVERAGE HEALTH SPENDING WAS ONLY

$41 A PERSON

IN 2017, COMPARED WITH US$ 2,937
IN HIGH INCOME COUNTRIES
WHO Director-General Dr. Tedros Adhanom Ghebreyesus said in a March 2019 speech: “We must approach partnerships with a can-do mindset. We must focus on our objectives, pursue bold partnerships, and manage the risks, rather than avoiding risks at all costs, and foregoing opportunities as a result.”

Access Accelerated is rooted in partnership because the scale and complexity of NCDs and global ambitions to provide “health for all” demands it. Individually, each Access Accelerated member company has a legacy of public health programs, knowledge and experience. By working together through innovative partnership models, we can combine individual strengths for greater collective impact.

With significant activity happening in the NCD space, it can often be challenging to find consistent information on what programs are being implemented and what impact they are having. In response, Access Accelerated collects and shares best practices and learnings to design and implement even more effective NCD programs.

In 2019, we published Access Accelerated in Action: Key Learnings in Program Design & Implementation, a resource that not only helps companies design and run even more effective NCD programs, but also responds to a global need for greater knowledge-sharing on practical experiences in public health.

Access Accelerated in Action articulates six cross-cutting principles that underpin our commitment to strengthening NCD programs: a patient-centered approach; strong local ownership and engagement; substantive partnerships; sustainable, equitable solutions; innovation and continuous learning; and rigorous measurement and transparency. Through a series of 19 case studies, the report examines how member companies have incorporated these principles into their programs.

Our work with PATH to develop the NCD Navigator also helps facilitate better collaboration across sectors. Through dashboard-based surveillance and dynamic mapping of NCD programs, NCD Navigator tracks the activities of all institutions contributing towards country-level NCD strategies. With this information, partners can eliminate fragmentation and duplication to align country-wide efforts for greater impact. Centralizing this information also builds a common understanding of activities that are currently underway to ensure new programming and partnerships build on this foundation.
The Access Accelerated Open Platform is a knowledge resource that catalyzes global action on NCDs by centralizing programmatic information. Users can more readily identify gaps in NCD programs and opportunities for future collaboration with both the biopharmaceutical and public health sectors. Repositories of data are a powerful lens to identify areas for social impact and provide transparency into what investments are underway. The user-friendly, accessible Open Platform offers data that can be harnessed to serve the public good.

With more transparent knowledge-sharing, we can enable greater visibility into the work that’s underway, the gaps that need to be filled, opportunities for partnerships and ways to drive greater efficiencies.

For more information on the programs led by member companies, visit the Access Accelerated Open Platform, which showcases more than 107 total active initiatives addressing NCDs. https://aaopenplatform.accessaccelerated.org/
When Access Accelerated launched, we committed to accurately measuring our impact individually and as a sector. We know that quality data and a strong evidence-base can strengthen decision-making and provide accountability to program goals.

For the past three years, Boston University has been operating the Access Observatory to publicly share results from registered member company programs as evaluated by an independently designed measurement framework. The Access Observatory is managed by a team based in the Department of Global Health at the Boston University School of Public Health and provides common language for categorizing, understanding and comparing NCD programs.

In July 2019, the Access Observatory published its second annual report, “Establishing the Foundation for Shared Learning,” and in summer 2020, will publish the third annual report. This reporting underscores the efforts our member companies are making to advance continuous learning, rigorous measurement and transparency.
Below is a summary of 72 active Access Accelerated programs registered in the Access Observatory as of 28 May 2020.

**Number of Programs by Strategy Employed**

<table>
<thead>
<tr>
<th>STRATEGY</th>
<th>NUMBER OF PROGRAMS</th>
<th>PERCENTAGE OF TOTAL ACTIVE PROGRAMS (N=72)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Health Service Strengthening</td>
<td>57</td>
<td>79.2%</td>
</tr>
<tr>
<td>2 Community Awareness &amp; Linkage to Care</td>
<td>52</td>
<td>72.2%</td>
</tr>
<tr>
<td>3 Health Service Delivery</td>
<td>39</td>
<td>54.2%</td>
</tr>
<tr>
<td>4 Price Scheme</td>
<td>13</td>
<td>18.1%</td>
</tr>
<tr>
<td>5 Medicine Donation</td>
<td>7</td>
<td>9.7%</td>
</tr>
<tr>
<td>6 Regulation &amp; Legislation</td>
<td>5</td>
<td>6.9%</td>
</tr>
<tr>
<td>7 Supply Chain</td>
<td>4</td>
<td>5.6%</td>
</tr>
<tr>
<td>8 Financing</td>
<td>3</td>
<td>4.2%</td>
</tr>
<tr>
<td>9 Product Development Research</td>
<td>1</td>
<td>1.4%</td>
</tr>
<tr>
<td>10 Manufacturing</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>11 Licensing Agreement</td>
<td>0</td>
<td>0.0%</td>
</tr>
</tbody>
</table>

57 programs (79.2%) had multiple strategies employed.

**Number of Programs by Disease Categories**

<table>
<thead>
<tr>
<th>DISEASE CATEGORY</th>
<th>NUMBER OF PROGRAMS</th>
<th>PERCENTAGE OF TOTAL ACTIVE PROGRAMS (N=72)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Cancer</td>
<td>47</td>
<td>65.3%</td>
</tr>
<tr>
<td>2 Diabetes</td>
<td>12</td>
<td>16.7%</td>
</tr>
<tr>
<td>3 Cardiovascular disease</td>
<td>12</td>
<td>16.7%</td>
</tr>
<tr>
<td>4 General NCD care</td>
<td>11</td>
<td>15.3%</td>
</tr>
<tr>
<td>5 Other NCD</td>
<td>10</td>
<td>13.9%</td>
</tr>
<tr>
<td>6 Mental and neurological disorders</td>
<td>10</td>
<td>13.9%</td>
</tr>
<tr>
<td>7 Other Non NCD</td>
<td>6</td>
<td>8.3%</td>
</tr>
<tr>
<td>8 Respiratory disease</td>
<td>5</td>
<td>6.9%</td>
</tr>
</tbody>
</table>

"Access Accelerated is focused on enhancing collaboration and reducing fragmentation of NCD programs through a collective approach. There are great opportunities for inter-company collaboration in testing innovative approaches to improve access and joint evaluation of company programs operating in the same disease or geographic area. There are also opportunities for joint implementation and evaluation of innovative pilot programs to create new knowledge as to which access strategies work best in different contexts."

RICHARD LAING, PETER ROCKERS, CHUKWUEMEKA UMEH AND VERONIKA WIRTZ IN THE "LETTER TO THE BIOPHARMACEUTICAL COMPANIES' CEOS"
Dr. Bernard Gitura, Cardiologist and President of the Kenya Cardiac Society, Kenyatta National Hospital
SCALING SOLUTIONS

The decades-long call to beat NCDs is in a pivotal moment to tap the right resources, build the right partnerships and foster innovative solutions to improve health outcomes. Access Accelerated is exploring three areas where we know the holistic perspective brought by uniting the expertise of our member companies can accelerate solutions: supply chain, primary care and digital health.

All of our activities in these important areas evoke the central promise of Access Accelerated—collaboration. No one company or sector can break the systemic barriers to NCD care alone. The World Bank, C/Can, World Heart Federation, NCD Alliance and PATH are critical partners in Access Accelerated’s efforts to pilot and scale solutions.

With the World Bank, we work on health system strengthening initiatives in Kenya, Vietnam, China, Ghana, Colombia and El Salvador. In China, we supported knowledge exchange on people-centered integrated care to inform a large health reform project that aims to strengthen primary care services for NCDs. In El Salvador, we brought together the Ministry of Health, regional authorities and people living with NCDs to pilot an integrated health care service delivery model for cervical cancer in three regions of the country. As a result, 14,000 doses of HPV vaccine have been procured, and we produced a suite of tools for health workers to ensure delivery of a basic package of NCD services for women.

Our work with implementing partners like the World Bank embraces a spirit of collaboration and innovation to increase access to NCD prevention, treatment and care. Member companies also look to scale solutions—as noted by the Access Observatory while assessing company-led NCD programs, there are “opportunities for joint implementation and evaluation of innovative pilot programs to create new knowledge as to which access strategies work best in different contexts.”

In the areas of supply chain, primary care and digital health, Access Accelerated brings member companies and partners together to continue identifying opportunities and unmet needs while exploring areas ripe for innovation and scaling the solutions that work.

WORLD HEART FEDERATION

An estimated 75 percent of Kenyans who live with hypertension do not know they suffer from it. Following a 2018 “Accelerating Solutions to Hypertension Management Roundtable,” convened with support from Access Accelerated, World Heart Federation collaborated with the Ministry of Health on the dissemination and implementation of the Kenya National Guidelines for Cardiovascular Diseases (CVD) Management and Handbook. These guidelines provide a standardized way of managing cardiovascular disease, particularly in primary health care. However, a baseline survey conducted among 60 health providers in Nyandarua County indicated that less than half of the health facilities had access to the CVD guidelines.

In 2019, Access Accelerated helped the WHF disseminate the guidelines in five counties. By June, 25 health workers were trained as Trainer of Trainees to champion the dissemination of the guidelines. Ten county-level dissemination workshops took place in late 2019, targeting a total of 300 health professionals. Together, we worked with local stakeholders to identify roadblocks and propose solutions that ensure critical resources, like these guidelines, reach the people who need them most.
A reliable supply chain is often referred to as the “backbone” of an effective health system. From procurement to transportation to information technology infrastructure, every end-to-end supply chain involves complex processes and policies that ensure medicines and treatments reach the people who need them.

For people living with NCDs, long-term interactions with the health system and access to essential medicines are a reality. This makes supply chain management a critical component of chronic disease management. Eliminating bottlenecks in a supply chain is vital not only for the health system at large, but also for advancing NCD prevention, treatment and care. Far too often in LMICs, supply chain challenges stand in the way.

These challenges include workforce capacity and resources, governance, accountability, data collection and more. To address the rising burden of NCDs, we need to fast track supply chain solutions. In Kenya and Ghana, PATH and Access Accelerated are driving progress through an end-to-end supply chain mapping of NCD commodities to identify barriers and opportunities for action.

In 2019, PATH conducted an end-to-end “Journey of the Pill” supply chain assessment to identify gaps and bottlenecks that are reducing the availability of NCD medicines, equipment and supplies in Kenya. The assessment maps tracer medicines using batch numbers from the time of manufacture or entry into the country to the time of dispensing to patients. Monitoring the journey of these medicines helps pinpoint strengths and inefficiencies at all levels in the supply chain.

Conducted in six counties and with 60 public, private and faith-based facilities, this assessment will inform future actions by Ministries of Health and stakeholders to strengthen supply security. After findings from the assessment are validated, they will be disseminated with the Ministry and key stakeholders to develop an action plan to address barriers and improve access to NCD medicines and products.

In Ghana, PATH, in partnership with the Ghana Health Service, developed a protocol for an end-to-end supply chain assessment in 2019. Data collection and analysis will proceed in 2020. These assessments are critical building blocks toward stronger supply chain management, and in turn, stronger NCD prevention, treatment and care.
DIGITAL HEALTH

The potential for digital health to improve health care delivery and outcomes is indisputable. Incorporating an integrated digital service model can empower patients, relieve the burden on health care professionals and yield valuable data that provides insights on costs and outcomes of care. This inspires Access Accelerated and our member companies to explore the role of innovative digital platforms at global, national and local levels.

Pursuing sustainable and scalable digital health solutions in LMICs can be accompanied by challenges specific to low-resource settings, but noteworthy resources are in development. After evaluating the evidence on emerging digital health interventions, WHO released its first guideline exploring how digital tools can complement and enhance health system functions. From electronic health worker trainings to the use of mobile devices for stock notification and commodity management, the guideline includes 10 recommendations for how countries can use digital health tools to improve patient care and strengthen health systems.

As a part of our efforts to elevate digital service models for NCDs, Access Accelerated is gathering information and experience in how digital technologies can address health system challenges. In Vietnam, we’re gaining firsthand insights through our work with PATH and the Ministry of Health to strengthen the NCD health information system. We’re also supporting the development of a mobile app for people in the community, which generates reminders for health checkups, integrates a self-assessment tool for NCD risk factors, uses geolocation to suggest nearby health facilities, and reminds patients to take medication, practice healthy lifestyles, and revisit doctors regularly. The app with supports patients to adhere to treatment and data from the app will be integrated into the NCD health information system, providing policy makers with real-time data on successful approaches and the hypertension burden.

With digital tools evolving rapidly, making smart investments and drawing from the most up-to-date evidence will be critical. Access Accelerated continues to explore the potentially transformative impact of digital health for overcoming barriers to NCD prevention, treatment and care.

“Digital health is empowering communities and individuals to improve their health and well-being in unprecedented ways. They are accessing services in environments that are comfortable and familiar as care is brought out of hospitals and closer to home, and at times that are convenient and meaningful by using, for example, smart devices to track, manage and improve their health.”

DR ZSUZSANNA JAKAB, REGIONAL DIRECTOR FOR EUROPE, WORLD HEALTH ORGANIZATION
“It’s important to ramp up investments in affordable, quality primary health care. This makes sense both from a health and economic perspective. We need more resources to detect and treat conditions early, before they become more serious. This will save lives and reduce health care costs.”

DAVID MALPASS, WORLD BANK GROUP PRESIDENT
In 1978, the Declaration of Alma-Ata made the case for comprehensive primary health care and elevated the issue on the global agenda. Today, primary health care is the cornerstone of universal health coverage efforts and continues to address the majority of a person’s health needs throughout their lifetime, including their physical, mental and social well-being. In the words of WHO Director-General Dr. Tedros Adhanom Ghebreyesus, “Primary health care is where the battle for human health is won and lost.”

Yet, only 6 percent of low-income countries, compared with 85 percent of high-income countries, have the necessary equipment to take essential primary care measurements like height, weight, blood glucose, blood pressure and cholesterol. In Kenya, NCDs account for more than 50 percent of total hospital admissions and more than 55 percent of hospital deaths. Rather than treating life-threatening diseases and illnesses as they arise, health systems in LMICs urgently need the resources, trained health workers and policies to support people-centered primary health care.

This is why Access Accelerated advocates for the integration of NCD prevention, treatment and care in primary health care. This integration can help us achieve a future where we see more early screenings instead of late stage diagnoses. Patients will have regular blood pressure readings instead of sudden cardiovascular collapse.

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**This is the future that we are starting today.**

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**In Action**

**Communities for Healthy Vietnam**

Around 25 percent of adults in Vietnam have hypertension, but only half know they have the condition. Through the Communities for Healthy Vietnam program, implemented in 2019 by Access Accelerated and PATH, in partnership with the Ministry of Health, we are scaling an innovative health care delivery model to improve patient management of hypertension and diabetes.

This model brings screening and referral services to the people that need them by setting up free checkpoints in convenient community hubs such as markets, cafes and barbershops. The people key to this model’s success are community health volunteers and workers. They are trusted members of their community who are on the frontlines of increasing access to services. In 2019 alone, over 10,000 people were screened, and 5,000 people living with hypertension and 1,000 people living with diabetes were linked to care. Through a community-based and people-centered approach, Communities for Healthy Vietnam is engaging health leaders, the community, the public health system and the private sector to address some of the NCDs that far too many people suffer from, most without even knowing until it is too late.
Members of the community at an AMPATH clinic in Trans-Nzoia County, Kenya supported by the World Bank and Access Accelerated
LESSONS LEARNED

By design, Access Accelerated embraces continual learning. We know that it is important to share knowledge and an honest reflection on what needs to evolve to have greater impact. As we reflect on 2019, a few key learnings emerged:

Effective Collaboration with Country Governments

Access Accelerated and our implementing partners actively seek out and align with country-level leadership on their commitments to NCD response. For the World Bank, this is demonstrated through “recipient executed” activities, meaning the World Bank transfers funds to a country to implement the project through the country systems. While this is how the World Bank operates by default, we found that this model did not always work in countries where significant delays in funding occurred. We are testing new solutions, specifically World Bank-executed strategies, to ensure better and faster implementation.

Building Trust

Partnerships are vital to creating scalable solutions, but they also require building significant trust and shared understanding of goals and ways of working. We have learned the value of devoting the time and resources to align on common values and goals between partners, and remain committed to open communication. While this may mean slower timeframes and implementation schedules, we believe it is critical for building durable and sustainable long-term solutions.

Scaling Promising Pilots

Access Accelerated is uniquely positioned to work with companies to scale-up promising solutions from existing programs. Working with PATH, the Communities for Healthy Vietnam program leverages and builds on the successful community-based patient-centered model of NCD care PATH originally established with the Novartis Foundation in 2016 and expanded with support from Access Accelerated since 2019. The project demonstrates the power of proactively identifying these pilots and mobilizing resources to ensure their impact is sustained. Vietnam’s Ministry of Health also recognizes the value of this approach and asked for the pilot to be scaled up. Access Accelerated will continue to explore opportunities to scale promising company pilots.
MESSAGE FROM THE DIRECTOR

Since the launch of our initiative three years ago, Access Accelerated has made significant progress in the ongoing fight against NCDs. Fostering new partnerships, celebrating meaningful milestones that help people and driving solutions gives us all so much to be proud of in our work to expand access to quality care and improve health.

When we began this work, we recognized the long-standing investments individual companies have made to advance NCD care. Each member company continues their programming, and through Access Accelerated we ask: How can we combine individual efforts and investments, share insights and do more? What role can we play in breaking the barriers that weaken health systems and keep care out of reach from patients in need? When global health crises like COVID-19 emerge, how can we do our part to help ensure quality NCD care continues to be delivered to everyone, no matter where they may be?

Our partnership is rooted in the need to answer these questions with meaningful and appropriate action. These questions motivate us, they frustrate us, and ultimately, they are what lead us to develop innovative programs and pilots. We are committed to being fully transparent and accountable in our journey to find solutions, and will share our lessons learned so that each step is a step closer to our goal.

In the years ahead, we will continue our work toward SDG 3.4, 3.8 and 17. We will also continue to advance and inform a wider discussion on how public-private partnerships can work even better. Through Access Accelerated, we have established a wide range of new partnerships enabling us to move together through a collective journey—and we are picking up the pace! Accelerating the global NCD agenda cannot be done without collaborating with people living with NCDs, and empowering their voices as patient advocates for change. As our world faces the unexpected impacts of COVID-19, these human connections and meaningful collaborations are needed now more than ever before. That is the only way we can drive sustainable change in health systems, and ensure that our work fosters resilience in COVID-19 impacted countries and the NCD crisis that touches LMICs and all of us worldwide.

This sense of collaboration, shared responsibility and connectedness—which extends beyond sectors and geographies—is key to improving quality of life for us all and key to Access Accelerated. It is essential if we truly strive to be transformational and leave no one behind.

Working together with people, local governments, our outstanding partners and NCD advocates around the world, Access Accelerated is proud to initiate a second phase of our initiative by ringing in Year 4. We have a lot to do but this is an exciting adventure for us all. Thank you!

Sincerely,

James Headen Pfitzer
Director, Access Accelerated