ACCESS ACCELERATED IN 2023

A look back.
An exciting future.

2023 in highlights
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In a world of change, organizations must be prepared to respond and evolve. For Access Accelerated, this means reshaping our longstanding commitment to taking on noncommunicable diseases (NCDs) in low- and middle-income countries (LMICs) to address the most pressing needs facing the global NCD community.

Access Accelerated is no stranger to navigating a shifting global health landscape. Our ability to adapt to the complex and varying needs of global health stakeholders around the world has been steadily honed over our seven-year history.

As we move into 2024 and look forward to the second World Health Organization (WHO) global dialogue on financing national NCD responses and the fourth UN High-Level Meeting on NCDs in 2025, this evolutionary process continues.

Our successes, the connections we’ve formed, and the inroads we’ve made since 2017 have resulted in a bedrock of data and knowledge on which we are now building for the future, ensuring that we keep what’s effective while finding new ways to help more people, reach further, and be more focused and effective than ever before.

Looking ahead, we are convinced that identifying and implementing innovative ways to drive financing for NCDs is essential for achieving global health goals, and this will be our focus. However, our fundamental approach to addressing NCDs will not change, and neither will our unwavering commitment to the needs of the people who matter most: people living with NCDs and those who care for them. These are the voices who will continue to be central to our work.

What’s next for Access Accelerated? You will see us intensify our efforts to better respond to the needs of governments and other stakeholders so that, working together, we can more effectively harness the data and resources necessary to build robust health systems through sustainable and scalable national NCD financing mechanisms, policies, and programs.

We will also continue to leverage our experience as a collective of industry leaders to strengthen the private sector’s role in addressing NCDs and respond decisively to growing calls by world leaders and experts for multisectoral NCD collaborations.

Our ongoing strategic partnership with the World Bank Group—a collaboration that has supported many countries by catalyzing critical financing and facilitating the exchange of knowledge—will grow even deeper and stronger in 2024 and the years to come.

This is an exciting time. As Access Accelerated continues its evolution, we embrace the opportunity to build on what we have learned over the last seven years and to take strides toward fulfilling the UN’s Sustainable Development Goals (SDGs) on reducing premature NCD deaths and achieving universal health coverage (UHC). Backed by the strong support of our member companies, collaborators around the world, and the World Bank, we are more determined than ever to make a meaningful difference for people living with NCDs.

The Access Accelerated Executive Committee:

Michael Fredrich, Chair
Sara Martin, Vice-Chair
Takanori Sato, Vice-Chair
Access Accelerated was founded in 2017 as a first-of-its-kind collective of biopharmaceutical and life science companies. Our member companies share a commitment to delivering on the UN SDGs by reducing premature deaths from NCDs and achieving UHC.

We are as committed to these goals today as we were seven years ago, but times change, and we too must adapt to these changes. In some respects, 2023 was a unique year in our history. We saw the development, implementation, and expansion of successful initiatives, but in the face of stalled global progress toward achieving the SDGs, we also had a responsibility to reimagine how to best mobilize our resources and maximize our impact. Through an intense period of assessment, strategic planning, and dialogues with our partners, we enter this next phase with a vision for a focused and effective Access Accelerated initiative that is oriented towards addressing a critical need: catalyzing additional financing for NCD programs at a country level.

We continue to see that our approach to addressing NCDs, rooted in multisectoral collaboration, private sector engagement, and patient-centered initiatives, is effective. Our current and past strategic partners, including City Cancer Challenge, the NCD Alliance, PATH, the World Bank, and the World Heart Federation, did important work in 2023, with their impacts felt from Kenya to Kosovo, Chile to Vietnam.

In 2023, we also made good on our ongoing commitment to encourage collaboration and unite the broader health community with events and knowledge sharing opportunities. These included a Chatham House roundtable discussion on improving access to healthcare via effective partnerships with industry, a World Health Assembly side event on sharing lessons learned to solve the challenge of NCDs, and a UN General Assembly side event on integrating health financing to achieve UHC and NCD SDG targets.

Events like these will remain an important part of our work as we seek to create avenues for the exchange of knowledge and experience and identification of new types of collaboration opportunities.

As we step into our next phase, I’d like to share a note of gratitude. Our present and future work would not be possible without the dedication, persistence, and faith of our members, collaborators, and partners. Their commitment, belief, and input will help guide us into a better future. I would also like to thank my predecessor, Martin Bernhardt, for his inspirational leadership and many contributions. Finally, a special acknowledgement goes to our colleagues at the World Bank with whom we have been working closely over recent months to explore more efficient and effective ways of working together to best serve the needs of governments, other stakeholders, and people living with NCDs around the world. I am confident that this refined model for collaboration will achieve not only wide-reaching but also lasting impact.

Busy times are ahead: the second WHO global dialogue on financing national NCD responses is scheduled to take place this summer and the fourth UN High-Level Meeting on the Prevention and Control of NCDs will be held in September 2025. With 2030 approaching fast, these events represent a powerful opportunity to take significant strides toward achieving the UN SDGs by transforming past commitments into effective action on financing for NCDs as part of UHC packages at a country level.

While our efforts and attention are focused on building the future, let’s also make time to appreciate our successes of this past year. This report serves as a record of our shared achievements and a glimpse of a unique year in our history while providing us with inspiration as we begin the next phase of our journey.

Herb Riband
Interim Director
Access Accelerated
A SHARED VISION: A RENEWED PARTNERSHIP

NCDs are an issue interwoven with many of the World Bank’s core priorities, from universal healthcare to gender equity, and from nutrition to climate change. Since 2017, Access Accelerated and the World Bank have nurtured a partnership defined by deep mutual trust, shared ambition, and a unified commitment to taking meaningful and urgent action on NCDs that impact each of these critical areas.

The collaboration has led to working in a more integrated way that makes the best use of limited resources. Over the last seven years, the joint collaboration has catalyzed a total of USD 3.7 billion in NCD investment, supporting over 35 client countries. The partnership’s flexible financing model has offered opportunities to explore innovative solutions that are locally responsive, sustainable, and scalable.

Looking at the road ahead, ingenuity, adaptability, and efficiency are needed to maximize collective impact. The central question becomes how to scale up past projects and leverage key lessons to a national level. To achieve this will require a focus on supporting governments with innovative, catalytic health financing solutions and sharing knowledge that builds and strengthens resilient health systems.

Local leadership driving local priorities will be equally critical. This will necessitate a shift to a more localized and decentralized approach, one that actively engages and equips national governments and local stakeholders to effectively respond to NCDs at the community, regional, and national levels.

The next phase of the Access Accelerated-World Bank partnership represents a significant step closer to translating these shared goals into action that will directly improve the lives of people living with NCDs.
“At the heart of our collective efforts is our work with countries to enable better health and well-being for millions. 

Since 2017, the World Bank and Access Accelerated partnership has made a vital contribution to the country-level NCD agenda. The financing from the Access Accelerated partnership gave our operational teams access to additional flexible resources to support countries in innovative analytics and technical assistance to inform policy dialogue on NCD care integration through health systems strengthening programs. We look forward to continuing our collaborative efforts driven by the shared goal of improving health outcomes for all.”

Dr. Monique Vledder
Head of the Global Health, Nutrition and Population Department
World Bank
FINANCING NCDs AND THE FUTURE OF UHC

Herb Riband reflects on the data and discussions from 2023’s UN High-Level Meeting on universal health coverage and how, in this pivotal moment, we can seize the opportunity to strengthen financing for NCDs to achieve Health for All.

By Herb Riband
Interim Director, Access Accelerated
The endorsement of the second UN political declaration on UHC at the UN High-Level Meeting (HLM) on UHC in September 2023 came at a pivotal moment. This political declaration, coupled with the stark findings of the 2023 universal health coverage global monitoring report by the WHO and the World Bank, sent a clear and compelling message: global progress towards UHC has stagnated in recent years, and UHC is not advancing as it should, including in LMICs.

Aging populations, COVID-19 and its aftermath, and a succession of global crises have resulted in stalled service coverage and a decline in financial protection for people seeking life-saving care. At the center of these challenges is the continuing surge in NCDs, which can no longer be overlooked as a critical component of achieving UHC.

Launched ahead of the UN HLM on UHC, the Tracking Universal Health Coverage: 2023 Global Monitoring Report presents a sobering overview of the faltering global progress in health service coverage (SDG 3.8.1) and financial protection (SDG 3.8.2). In 2021, over 4.5 billion people—more than half the world’s population—lacked full coverage for essential health services. People living with NCDs remain underserved, with almost negligible increases (1% or less) in NCD service coverage prior to 2015, and little or no improvement observed from 2019 to 2021.

In 2019, around 1 billion people experienced catastrophic out-of-pocket health expenses, with low-income families most vulnerable to being pushed into poverty as a result.

When people are denied the right to quality, essential health services, we harm the health of individuals, destabilize communities, and impede economic development. The need for global and local leadership and meaningful change has never been clearer.

The second UN political declaration on UHC acknowledges the inadequacies and challenges faced so far, including the shortfall in health financing and the scant progress towards addressing NCDs. To regain lost momentum, this declaration sets out several renewed commitments to achieve Health for All by 2030, including primary healthcare strengthening and ensuring sufficient, sustainable investments for better health.

Unlocking financing to build resilient health systems and protect individuals from increased out-of-pocket spending is critical. In September 2023, Access Accelerated, the NCD Alliance, World Bank, and the World Diabetes Foundation, in cooperation with the WHO, co-hosted a roundtable discussion on the margins of the UN General Assembly (UNGA). It served as a vital platform to share examples of best practices and learnings. (See pages 29 and 30 for more.)

The discussions confirmed a collective resolve among participating policy makers, companies, and civil society organizations: stepping up financing for NCDs is indispensable for making headway toward achieving UHC.

Collective action by governments, development partners, funders, healthcare professionals, patient advocacy groups, and private sector organizations has never been more important. Since 2017, Access Accelerated has partnered with the World Bank and other strategic partners to support countries and their ministries of health and finance to address ways to improve access to quality NCD care, creating positive ripple effects that benefit entire health systems, and ultimately the communities and individuals they serve.

Our collective ability to act decisively and invest now will improve the health and economic future of billions of people. There is much work to be done, but the imperative to build quality NCD care as part of UHC is clear. The time for action and investment is now.
“UHC is the cornerstone of global health and a robust and resilient health system. At the same time, the intertwined nature of UHC and noncommunicable diseases means that to achieve the former, we must also address the latter.”

Dr. Megumi Maruyama  
Global Health Officer, Sumitomo Pharma  
Board Member of Access Accelerated
Access Accelerated partners made an impact that was felt around the world in 2023. From Chile, where communities grapple with a growing mental health crisis, to Kosovo, where the youthful population faces an increasing NCD burden, our partners’ work inspired and motivated us.

The following collection of stories is just a snapshot of the achievements and progress being made in countries as our partner organizations work tirelessly to reduce deaths and improve the lives of people affected by NCDs.
IN 2023, ACCESS ACCELERATED SUPPORTED PROJECTS IN OVER 20 COUNTRIES.

Bangladesh
Cameroon
Ecuador
El Salvador
Croatia
Dominica
Ghana
Grenada
India
Kenya
Kosovo
Malaysia
Paraguay
Peru
Republic of the Congo
Saint Lucia
Saint Vincent and the Grenadines
São Tomé and Príncipe
Serbia
Uruguay
Vietnam
Since declaring independence in 2008, the Republic of Kosovo has seen important human capital and economic growth, outperforming its neighbors over the past decade. Yet these improvements risk being set back due to the high noncommunicable disease burden. A study published in June 2023, led by the World Bank and supported by Access Accelerated, described the impact NCDs have on the Kosovar population. In 2019, NCDs represented the cause of death of around 80% of all fatalities in the country.

"This study is one of the first comprehensive pieces of evidence on NCDs in Kosovo," says Ha Thi Hong Nguyen, Senior Health Economist at the World Bank, who co-led the study. "Its aim is to strengthen the health system, build resilience, and prepare Kosovo against the rising burden of NCDs."

Kosovo has a population of 1.8 million and boasts a unique demographic with more than 50% of its population under 25 years old, making it the youngest society in Europe and providing a distinctive scenario to foster healthy lives for a growing economy. However, the study found that even young adults are being diagnosed with NCDs. The authors reported that, in 2019, just over 20% of deaths among Kosovars aged between 20 and 29 years were due to NCDs. The burden of NCDs in Kosovo is fueled by preventable risk factors, such as smoking (particularly among men), unhealthy diets, and physical inactivity.

Efforts to address NCDs in Kosovo are compromised by a lack of awareness, underutilization of primary healthcare services, and fragmented health systems. Chronic conditions like hypertension...
and diabetes often go undiagnosed or uncontrolled, and screening programs for the most common types of cancer are severely limited due to lack of infrastructure. For example, in 2016, there were only four hospitals with mammograms and around 25,000 women were screened for breast cancer – representing less than 10% of eligible women. The study also found that NCD care is not reaching populations equally: the Roma, Ashkali, and Egyptian communities, as well as rural populations, are less able to access the care they need.

The authors reported that the challenges facing Kosovo in the management of NCDs are driven by a limited number of standardized clinical protocols, uncoordinated referral mechanisms, and information systems from hospitals and primary care clinics working in silos. Healthcare services are free to Kosovars, but the study shows there remains a reliance on out-of-pocket payments to pay for pharmaceuticals that could hinder people from accessing the care they need.

At a policy level, Kosovo has committed to international regulations on tobacco, alcohol and the environment. The country has adopted the recommendations from the World Health Organization and implemented excise taxes and restrictions to accessing tobacco and alcohol. However, the policies can still be improved to reach international standards. Kosovo has also been actively implementing policies to reduce air pollution and has adopted the European Commission’s thresholds for harmful particles (i.e., PM2.5).

Based on the study findings, a series of interventions have been proposed to address the burden of NCDs. The recommendations include implementing rigorous national anti-smoking campaigns and digital data registries to extending cancer screening programs, developing a plan to attract and retain healthcare professionals, and advancing health financing reforms to protect Kosovars from catastrophic expenses due to healthcare.

By taking prompt, evidence-based action, Kosovo can now reshape its future, protecting its human capital from the devastating impact of NCDs and ensuring sustainable economic growth for generations to come.

“This study is one of the first comprehensive pieces of evidence on NCDs in Kosovo.”
In Chile, nearly a third of those over age 15 have experienced a psychiatric disorder at some point in their lives. A report released in 2023 by the World Bank, supported by Access Accelerated, highlights how Chile is redefining its approach to NCDs, including mental health.

Over recent decades, Chile has been one of the fastest-growing economies in Latin America. This progress has led to reductions in poverty, improvements in average health outcomes, and increased life expectancy. Yet the country faces a pressing challenge: NCDs and mental health disorders now account for over 85% of deaths, outpacing infectious diseases as the leading causes of mortality.
A World Bank report released in 2023, supported by Access Accelerated, examines Chile’s healthcare landscape, and offers a roadmap for countries facing similar crises. The report gains even greater relevance as global events such as pandemics and conflicts further strain national health budgets and undermine public health systems.

Healthcare access in Chile is marked by significant disparities. Of the estimated 11 million people living with an NCD, only about 4 million—approximately 36%—receive the treatment they need. Compounding this issue is a fragmented health system that results in inconsistent quality of care, redundant medication prescriptions, and often inefficient, unsafe treatment.

In response to these challenges, Chile’s Ministry of Health is leading a significant strategic shift. The strategy targets multimorbidity—the presence of two or more long-term health conditions—through an innovative reorganization of care delivery, moving away from defragmented care to continuous, people-centered, comprehensive care. Implemented since 2019, this approach reaches beyond the traditional healthcare model, seeking to empower people and their families and caregivers as active participants in their health.

Dr. Rialda Kovacevic, a World Bank Health Specialist who co-authored the policy note that documents Chile’s innovative response, says, “Chile’s story is a beautiful narrative where the health needs and wants of its people meet a long-term political commitment, coming in various forms, including financial.”

At the heart of Chile’s healthcare strategy is a strong, effective primary healthcare (PHC) system. Chile’s PHC provides health services to nearly 80% of the country’s population, especially those in low-income settings.

Mental health is an increasingly critical public health issue in Chile, with nearly a third of the population over age 15 experiencing a psychiatric disorder in their lifetime. A significant 6% of the country’s health budget has been allocated to mental health initiatives, marking a change in both perspective and priority. Over the last three decades, efforts have been underway to integrate mental health services into the national health network and to coordinate primary healthcare with specialized mental health teams.

“Mental health is an inextricable part of whole-person well-being, and the implications of addressing or ignoring it span outside of health, including social and economic ones,” notes Dr. Kovacevic.

Chile’s National Mental Health Plan (2017-2025) solidifies this more integrated approach, requiring that all mental health services are embedded within the community care model and are made an essential part of Chile’s network of health services.

Funding for mental health within Chile’s PHC has tripled between 2008 and 2017. The impact is evident: a 2014 WHO report indicates that psychologists are present in 99.6% of Chile’s primary healthcare systems, representing almost one psychologist in every primary care center. However, disparities in access and quality of care persist. Despite 15 million people being covered under the Public Primary Health Care insurance, only six million can access these services. Achieving universal access to care and universal health coverage remains a crucial goal for the government.

Chile’s concerted, ongoing efforts offer a rich source of insights and invaluable lessons that can inform other nations striving to strengthen their primary care and health system. Nearby nations like Brazil, Colombia, and Uruguay have already begun to adopt some of Chile’s innovative approaches.

“Thanks to the collaboration across sectors, leadership, communities, and academia, innovation was nurtured, resulting in valuable lessons learned that enabled successful scale-up of effective interventions,” says Dr. Kovacevic.
KENYA SHOWS THE POWER OF KNOWLEDGE SHARING

Rather than buckle under the weight of the dual challenge of communicable and noncommunicable diseases, Kenya’s government is demonstrating leadership on a range of projects designed to strengthen primary care and engage communities to improve NCD care.

It’s a double burden of disease. As Kenya wrestles with communicable diseases like HIV, malaria, and tuberculosis, it also faces another public health threat in the form of NCDs, which caused 39% of deaths in Kenya in 2020, up from 27% in 2014.

Many developing countries like Kenya have an unfinished communicable disease and maternal and reproductive health agenda, and a rapidly growing NCD burden. With governments facing competing demands in an increasingly tight fiscal space, finding innovative ways to tackle this double burden is critical.

Rather than buckle under the weight of these challenges, Kenya’s leaders have demonstrated perseverance and creativity in addressing them.

Takanori Sato, Director of Global Public Affairs at Takeda and Vice-Chair of Access Accelerated, sees this as the basis for a strong partnership, where governments create an enabling environment that includes commitment from a wide range of stakeholders and funders.

“Kenya has a solid track record of creating a strong enabling environment, with high-level commitment and leadership, a national NCD strategic plan, and disease-specific strategies and guidelines,” he explains. “There is a strong foundation to build on.”

This environment has helped bolster cooperation between the Kenyan government, the World Bank, and Access Accelerated, and it has underpinned a range of projects designed to tackle NCDs.

Those include a pilot to support the AMPATH Primary Integrated Care For 4 Chronic Diseases initiative, aimed at strengthening services at the primary care levels by working with communities to improve access to NCD services and provide better financial protection for patients and their families.

“It’s important to generate strong evidence for the government to expand the model,” says Toni Lee Kuguru, the project’s Task Team Leader and Senior Health Specialist at the World Bank. “It requires rigorous evaluation, which needs to be embedded in the design of the project or program.”

To that end, the pilot was designed to generate lessons that would support its national scale-up in Kenya by inspiring county officials to replicate the model in their own communities.
Kenya’s devolved health system means that much of health service delivery is in the hands of county governments, so engaging and empowering these officials was key to ensuring continuity and sustainability.

“Strong buy-in by decision makers is needed, as well as the supporting budget to scale up and sustain the interventions,” says Kuguru. “You need close engagement at every stage of the program, from design to implementation, so that everyone recognizes the importance and value of what is being piloted.”

The pilot project was led by a group of Kenyan experts, who worked in close collaboration with officials from the Ministry of Health in Nairobi.

This included a collaboration with AMPATH, to draw on their extensive experience in developing a chronic care model initially designed for AIDS, and which has since been gradually adapted to address NCD. The collaboration offered a unique opportunity to further replicate and test the model for NCDs.

The AMPATH and Moi Teaching and Referral Hospital teams successfully mobilized community leaders and county officials to bolster commitment for the pilot.

“It was important to work with organizations which are a critical part of the local community,” says Kenneth Munge Kabubei, Health Economist at the World Bank. “By building up this trust and giving them room to implement the program, the pilot was embedded at the community level, and solutions could reflect the local needs and realities.”

One of several innovations was the establishment of patient support groups, which proved critical to empowering patients to better manage their own health, something that became especially important when COVID-19 disrupted the normal delivery of health services.

In total, hypertension screening reached roughly 185,000 individuals, diabetes screening was performed among close to 94,000 individuals, and breast and cervical cancer screening was provided to 20,000 and 24,000 women, respectively.

The success of the pilot project in Kenya will enable improvements elsewhere. As the global community looks to reimagine primary health care so that people can be identified early, diagnosed accurately, and placed on treatment promptly, the lessons from this project will help inform this vision.
INNOVATING A NEW WAY TO ACHIEVE HEALTH AND ECONOMIC GAINS
“As the burden of NCDs becomes clearer every day, countries are recognizing the need for population-level interventions and for exploring more innovative policy measures.”

Sugar-sweetened beverages (SSBs) represent a risk factor for heart disease, diabetes, obesity, tooth decay, and cancer, with a study published in 2019 by the Harvard T.H. Chan School of Public Health linking their consumption with an increased risk of premature death.

“As the burden of NCDs becomes clearer every day, countries are recognizing the need for population-level interventions and for exploring more innovative policy measures,” says Kate Mandeville, Senior Health Specialist at the World Bank and a driving force behind an SSB tax database, developed with the support of Access Accelerated and launched in March 2023. “SSB taxes are one tool we have to start to tackle this issue.”

SSB taxes represent an important approach to accelerating progress toward meeting the UN SDGs by 2030. “We’re seeing positive evidence emerging of the impact of innovative health policies like SSB taxes on improved population health outcomes, particularly in teenagers,” Mandeville says. Recent studies of the SSB taxes in Mexico and the UK have found that they led to reduced obesity in adolescent girls.

Mandeville and her team have focused on supporting Ministries of Health and especially Ministries of Finance that are considering introducing SSB taxes.

“Countries are the ones driving these policies,” she says. “Our role is to support governments to make informed decisions around the design and implementation of SSB taxes.”

But are SSB taxes regressive, unfairly punishing poorer populations? Will they lead to job cuts, as some critics have claimed?

To answer these questions, the World Bank developed a package of support, advice, and analysis. For example, in Kazakhstan, taking into account the longer-term effects on medical expenses and productivity meant that an SSB tax was actually progressive: people in poorer groups benefited more than richer groups. And evidence from independent evaluations of SSB taxes shows no evidence of job losses from SSB taxes—in fact, there were gains.

Nigeria was among the countries who needed to overcome vocal opposition before implementing an SSB tax. The World Bank team worked with a range of stakeholders there—including the country’s Ministries of Health and Finance, patient organizations, and researchers—to provide evidence. These efforts paid off in 2021, when Nigeria successfully passed its tax.

“Evidence is powerful in mobilizing support,” Mandeville says. “Even more persuasive is local evidence. Recognizing local concerns and generating local evidence that responds directly to those concerns is much harder to ignore and push back on.”

Aimed at researchers, policymakers, and the public, the Global SSB Tax Database offers insights into current coverage of SSB taxes, different tax models, and the design decisions made by various countries.

All told, the database reveals that there are around 118 taxes in 103 countries and territories, covering 51% of the world’s population.

“There are many more taxes on SSBs than we previously thought,” Mandeville says. “Perhaps even more surprising, we are seeing that their prevalence and popularity is much wider in LMICs. Lower-income countries are really taking the lead”.

Indeed, over two-thirds of the population in LMICs are covered by SSB taxes, compared to less than a third in upper-middle-income and high-income countries.

Ultimately, the intention is for countries to use the evidence to design tax models that work for their specific needs, as well as to improve on current practices.

“An SSB tax is one intervention within a package of policies to tackle NCDs,” says Mandeville. “It’s also an important signaling tool by governments to show that they are doing things differently. It’s an exciting time to be at the frontier of collecting evidence that can contribute to health policy and ultimately save lives.”
In New York, representatives of the Ghana NCD Alliance, Labram Musah (left) and Dr. Beatrice Wiafe Addai (right), met with the Hon. Harold Agyeman (middle), Ghana’s Ambassador to the United Nations, to discuss NCD priorities.

Photo credit: NCD Alliance
The NCD Alliance’s (NCDA) Advocacy Institute successfully wrapped its second phase in 2023, marking a critical period of growth and achievement. From 2020 to 2023, NCDA’s flagship capacity building program, made possible by partners that include Access Accelerated, focused on enhancing local NCD advocacy across 16 geographies. Its approach involved two key initiatives: the Seed Programme for nurturing emerging local NCD alliances and the two thematic Accelerator Programmes, with one focused on NCD prevention and the other on NCDs and UHC.

In July 2023, against the backdrop of the High-Level Political Forum on Sustainable Development in New York, NCDA’s Advocacy Institute brought together eight NCD alliances to a workshop titled Building momentum to advance NCD care and UHC towards the UN High-Level Meeting on UHC.

“The partnership with Access Accelerated enabled the participation of six advocates from Ghana, India, Kenya, and Vietnam to attend this important workshop,” explains Dr. Cristina Parsons Perez, Capacity Development Director of the NCD Alliance. “In addition to learning from each other and hearing from expert speakers, advocates were able to meet with their UN country missions to discuss NCDs and advocate ahead of the High-Level Meeting on UHC.”

An example of this work can be found in India, where the Healthy India Alliance (HIA) was involved in the Advocacy Institute’s second phase thanks to the Access Accelerated partnership. In May 2023, India’s Ministry of Health recognized the growing NCD burden by updating the National Programme for Prevention and Control of Cancers, Diabetes, Cardiovascular Diseases and Stroke to the National Programme for Prevention and Control of Non-Communicable Diseases 2023-2030 (NP-NCD).

The newly updated NP-NCD places significant emphasis on social mobilization, expanding services through community-based approaches, and making NCD services more sustainable, accountable, and community-owned.

The NP-NCD also references the India Advocacy Agenda of People Living with NCDs, a document outlining key recommendations by people living with and affected by NCDs that stem from community conversations led by HIA under NCDA’s Our Views, Our Voices initiative. The inclusion of meaningful involvement of people living with NCDs in NP-NCD is an important win for HIA’s network of lived experience champions. It also bodes well for sub-national multi-stakeholder working groups on NCDs and UHC in the states of Punjab and Maharashtra.

“The acknowledgement of [meaningful involvement] by NP-NCD is a call to action for all people living with and affected by NCDs to come forward and partner with civil society and the health workforce to ensure that no one is left behind in the progress towards Universal Health Coverage,” said Seema Bali, a lived experience champion and HIA member.

In 2023, alliances in Ghana, Kenya, and Malaysia prioritized community-led monitoring by developing and testing models of engaging communities in generating and analyzing data on the delivery of health services at the primary healthcare level.
“The positive ripple effects of this partnership and the NCDA’s achievements of 2023 will be felt for many years to come.”

The country-level achievements of grantees underscore the profound impact of empowering advocates with the necessary skills, support, and opportunities to not only raise awareness and shape policies but also ensure that all key voices are heard in crucial policy-making spaces. Indeed, the World Health Organization’s 2023 launch of its Framework for Meaningful Engagement of People Living with NCDs and Mental Health and Neurological Conditions clearly signals that this approach is essential for accelerating action and increasing impact of the NCD response.

The Global Charter on Meaningful Involvement of People Living with NCDs, launched by NCDA with the support of Access Accelerated in 2021, is based on the principle that people living with NCDs—including care partners—should be meaningfully involved in every step of the decision-making process related to the NCD response. This is a message that NCDA has promoted globally both in 2023 and over the past six years, with the support of the Access Accelerated partnership, through initiatives like the Walk the Talk webinar series in 2023.

“As NCDA looks to 2024 and beyond, we’re mobilizing our network to leverage the Global Charter and promote the WHO Framework with governments and WHO country offices,” says Dr. Parsons Perez. “It’s a strong sign that the positive ripple effects of this partnership and the NCDA’s achievements of 2023 will be felt for many years to come.”
For PATH, 2023 was a year marked by expansion, as it collaborated with country and local partners to open new avenues for several successful NCD projects using the many insights and lessons learned in recent years.
PATH works to improve access to person-centered primary healthcare. For people living with NCDs, this is a critical approach for ensuring essential, affordable NCD services are within reach. PATH’s health systems approach focuses on three components: availability of quality data to target NCD resources, access to NCD medicines and products, and integrated NCD services at the primary care and community level.

**Availability of quality NCD data**
One continuing, notable area of progress in improving access to quality data and information is the NCD Navigator, which was first introduced in Kenya in 2018 in collaboration with the Kenya Ministry of Health and with the support of the Access Accelerated-PATH partnership.

“This dynamic mapping tool tracks NCD programs, producing real-time data that enables policymakers to make evidence-based decisions,” says Helen McGuire, Global NCD Program Leader at PATH. “The NCD Navigator is instrumental in aligning NCD initiatives with national strategies, a critical step in ensuring cohesive and effective healthcare planning.”

Today, the Kenya Ministry of Health uses the Navigator to inform decision making and direct the implementation of its NCD 2021 – 2026 national strategy. The Navigator was subsequently introduced in Ghana in 2020, in partnership with the Ghana Health Service.

The Navigator played a pivotal role in resource allocation discussions as part of the development of Ghana’s NCD national strategy and policy in 2022 and continues to support stakeholder coordination initiatives to optimize impact.

The Navigator has since aided a high-level mapping initiative in Myanmar, while a successful orientation of the Navigator has been completed in Ethiopia and Nigeria in partnership with the World Health Organization. 2024 promises yet more expansion for the program, including a unique collaboration with the International Olympic Committee and the WHO that will incorporate sport and physical activity indicators across five low- and middle-income countries, including Vietnam.

**Access to NCD Medicines**
Supply chain innovations have originated from The Journey of the Pill NCD supply chain assessments, which were another key pillar of the Access Accelerated-PATH collaboration. Assessments conducted in Ghana, Kenya, and Vietnam laid important groundwork for targeted initiatives aimed at strengthening supply chains.

In Vietnam, for example, improved forecasting and supply planning capacity is resulting in better quantification and stock management of hypertension and diabetes medicines, while a stock tracker developed with the Kenya Medical Supplies Authority is providing important insight into the flow of NCD medicines through the country’s public system, which supports the redistribution of supply and the match between supply and demand at national and sub-national levels.

The Coalition for Access to NCD Medicines and Products, supported by the Access Accelerated-PATH partnership, introduced a new NCD forecasting tool in Kenya and Uganda in 2022. Working with both ministries of health, the data collection and workshops generated costed five-year forecasts and equipped advocates with essential data and evidence to support budget requests for NCDs, while also highlighting underfunded NCD disease areas and medicines that require increased budget allocation. In 2023, the NCD forecasting tool was introduced in Ghana.

“The ministry of health noted that the preliminary findings of the NCD forecasting tool’s expansion to Ghana revealed a significant gap—six to 10 times the current allocation across NCD medicines—between current funding and what would be required to treat NCDs based on local guidelines and practices,” says McGuire.

PATH also sought to make better use of excess vaccine cold chain storage. Following a baseline assessment for the integration of insulin into the existing vaccine cold chain, PATH and the Ghana Health Service conducted a pilot implementation for cold chain
integrated in the Ga West Municipal District in Ghana’s Greater Accra Region in 2023.

The pilot showed that integration is feasible, particularly at lower levels of care such as health centers and community-based health services, as long as proper guidelines, training, and monitoring are in place. Ghana’s experience informed a similar baseline assessment in Uganda, opening the door to more efficient NCD medicine delivery.

**Integrating NCD care at the primary care level**

In Vietnam, PATH implemented a transformative approach to NCD prevention and treatment by integrating screenings for diseases like hypertension and diabetes, once only available through expensive physicals at tertiary care centers, into primary care at the community level. PATH’s primary healthcare strengthening work began in four districts of Ho Chi Minh City and has since expanded to three regions of Vietnam as part of its partnership with Access Accelerated beginning in 2019.

Over the course of the project, more than 270,000 people were screened for diabetes and hypertension—surpassing initial targets. In 2023, the PATH team worked with the Ministry of Health to develop educational and capacity building materials to support further scaling of this work throughout Vietnam.

Taking a human-centered design approach, PATH also created an app to support self-screening for disease risks, provide information on hypertension and diabetes, and link patients with health facilities.

Since its launch, the app has averaged 1,000 downloads a week. PATH has also rolled out an app designed for health workers, allowing them to access patient self-screening results as well as diagnoses, clinic visits, and treatment information.

The adaptability of PATH’s primary care model has been proven in Kenya, where the initiative included a focus on developing digital health technologies, capacity building for healthcare and community workers, and strengthening last-mile distribution of medicines.

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In 2023 alone, the initiative screened close to 22,000 Kenyans for hypertension and over 1,400 for diabetes, with a significant portion referred for follow-up care. Nearly 5,500 individuals were enrolled in care during the year.

Cumulatively, the project achieved remarkable results, screening 114% of the original target population and enrolling 118% of the target into care. Of those with a confirmed diagnosis, 57% remained active in care, 67% achieved controlled blood pressure, and 60% maintained controlled blood glucose levels.

“It is evident that innovation, collaboration, and community-based approaches are essential to reshaping the landscape of quality NCD care,” emphasizes McGuire. “The collective achievements in 2023 and our six-year collaboration with Access Accelerated have shown lasting impact and clearly illuminates proof points to guide the way forward. We will continue to build on these successes to advance equitable access to quality care for people living with NCDs.”
Access Accelerated, alongside Boston University and Chatham House, brought together an expert panel in March to discuss two critical white papers: ‘Towards Harmonizing Measurement Standards of Access Partnerships’ and ‘Advancing the Science of Access’.

These papers explore the current state of access partnerships and identify avenues for their advancement. The ensuing discussions centered around the vital need for alignment in goals, metrics, and indicators among stakeholders and highlighted the importance of comprehensive research to understand the access landscape better and prevent redundant efforts through enhanced transparency and accountability in the reporting of the impact of access partnerships.
In May, on the sidelines of the World Health Assembly, Access Accelerated and its strategic partners brought together global and local experts to dissect and understand the learnings from six years of diverse cross-sector partnerships, with an eye towards accelerating our collective actions and shaping a vision for a healthier future.

This session was a vivid demonstration of the power of collaboration. It was an opportunity for experts to share insights, reflect on past strategies and challenges, and envision new pathways to tackle NCDs and broader health issues more effectively. It serves as a powerful reminder that when we bring together diverse perspectives and expertise, we can develop solutions that center patient needs and are both effective and sustainable.
“I am convinced that we can’t make headway if our governments don’t put funding towards NCDs. We are going to continue to require our governments to support NCDs. It requires a sustained effort to push the NCD agenda”

Dr. Lilian Mbau
CEO
Kenya Cardiac Society
On September 19, leaders convened for a timely roundtable event titled “Integrating Health Financing to Achieve UHC and NCD SDG Targets.” This gathering, which ran parallel to the opening of the 78th UN General Assembly, was hosted by Access Accelerated, the NCD Alliance, the World Bank, and the World Diabetes Foundation. It united a diverse group of stakeholders, including government representatives, members of the UN, NGOs, philanthropic organizations, and leaders from the private sector.

The agenda was clear: to deepen cross-sector dialogue, showcase innovative solutions in NCD care and financing as part of UHC packages, and develop strategies and calls to action for bridging the financial gaps as we approach the second WHO global dialogue on financing national NCD responses in 2024.
CALLS TO ACTION FROM THE JOINT ROUNDTABLE

For governments:

- Take action to support the integration of NCDs in health investments, including developing integration strategies that emphasize cost-effectiveness and establish clear benchmarks for NCD spending within UHC frameworks.
- Improve the monitoring of NCD investments through improved data collection and tracking within national health accounts.
- Identify and showcase local and national success stories in NCD management, including presenting evidence from case studies to support scale-up elsewhere.

For development actors:

- Take the NCD burden into consideration across health initiatives and programming, integrating NCD indicators and action within other health agendas and health systems strengthening efforts.
- Support implementing partners and provide them time to develop, implement, and evaluate NCD-related programs effectively.

For NGOs:

- Incorporate budget advocacy and accountability measures into NCD advocacy toolkits.
- Build up and disseminate examples of successful programmatic interventions to maximize existing resources.
- Highlight innovative initiatives that have successfully reduced inefficiencies in NCD management.

For the private sector & philanthropies:

- Pursue new opportunities and build multi-stakeholder partnerships with governments, international financing actors, development institutions, and NGO partners.
- Explore and deploy innovative financing models that catalyze and pool capital.

Roundtable participants (listed alphabetically)

“Through initiatives like Access Accelerated, it is exciting to see the potential of what the commitments and collaborations of the pharmaceutical industry can make possible. Moving forward we need to ensure that the commitments and contributions of stakeholders across all sectors are aligned in a shared direction to bring us closer to reducing premature mortality from NCDs by one-third by 2030.”

Dr. Alarcos Cieza
Unit Head, Department of Noncommunicable Diseases
World Health Organization
As we set our sights on the horizon, Access Accelerated would like to thank the partners whose dedication, expertise, and hard work helped so many people living with NCDs around the world in the past year. These achievements didn’t happen in a vacuum: while we saw the conclusion of successful projects in 2023, their positive effects will be felt throughout the public health sector for years to come.

We remain committed to multisectoral and multi-stakeholder partnerships and collaboration. These will be essential as we continue to mobilize the private sector to strengthen access to quality care for people living with NCDs. We look forward to working closely with our member companies, forging new partnerships, and revitalizing and reimagining existing connections as the coming months and years unfold.

Get involved
Access Accelerated member companies are at the center of an innovative collective dedicated to improving the lives of people living with NCDs. Joining us enables your company’s expertise, experience, and resources to do more, go further, and last longer as part of a global community.

Interested in joining? For a detailed information package, email secretariat@accessaccelerated.org
GET IN TOUCH

For more information, visit our website: accessaccelerated.org

Follow us on X: @NCDAccess
Connect with us on LinkedIn: linkedin.com/company/access-accelerated

Contact info@accessaccelerated.org

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OUR MEMBER COMPANIES

Each of our member companies has built its own foundation of successful NCD access programs, knowledge, and experience. Drawing on that expertise, innovative R&D, and business acumen has enabled Access Accelerated to become something even greater than the sum of its parts: an instrument for meaningful and lasting change.