Year Two Report

Working Together to Translate Words into Actions
# Table of Contents

Letter from the CEOs ................................................................. 1
Access Accelerated At-A-Glance ............................................... 3
Who We Are ........................................................................... 5

**Insights & Reflections From 2018** ............................................. 7

Understanding Our Context: Global Momentum Toward UHC .................. 8
What This Means for Access Accelerated ........................................ 10
Our Path ................................................................................. 11

**Progress to Date & Next Steps** .................................................. 13

Global Overview .................................................................... 14
Focus Countries ..................................................................... 16
Access Accelerated Action Areas .............................................. 18
Scale Up and Strengthen Industry Contributions for Greater Health Impact ................................. 20
Drive Sustainable Impact via Robust Multi-sectoral Partnerships .................... 23
Enhance Value and Reduce Fragmentation of NCD Programming Through a Collective Approach  ....................... 25

**Our First Focus Country: Kenya** ................................................. 27

Expanding to Ghana and Vietnam ................................................ 33

2018 Company Program Updates .............................................. 35

Looking Forward to 2019 .......................................................... 41

Welcoming New Members ......................................................... 43

Access Accelerated CEO Pledge ................................................ 45

Appendix: References .............................................................. 47
Letter from the CEOs

The rising global burden of non-communicable diseases (NCDs) represents one of the greatest threats to health and development worldwide. This burden is most acutely felt in low- and middle-income countries (LMICs), where millions of people living with or at risk for NCDs lack access to basic services and are twice as likely to die prematurely from preventable, treatable conditions.¹

We recognize the challenges associated with preventing, treating and caring for NCDs. It is more than just addressing a collection of diverse diseases. It means aiding a person’s ability to access appropriate, quality care. It also means strengthening a health system’s ability to support its people’s long-term needs sustainably.

To address this challenge head on, we created Access Accelerated to unite the global biopharmaceutical industry with cross-sector partners and by putting people at the center of our efforts, we are committing, mobilizing and acting to more effectively tackle NCDs.

Collectively, we are increasing access to prevention, treatment and care for NCDs and mobilizing the industry’s contribution to help achieve the United Nations Sustainable Development Goals (SDGs). In the spirit of SDG 17 – which aims to strengthen implementation and revitalize global partnerships – we are bringing a focused effort to support SDG target 3.4:

**By 2030, to reduce by one-third premature mortality from NCDs through prevention and treatment and promote mental health and wellbeing.**

This work is also a crucial contribution to support the global movement towards Universal Health Coverage (UHC), to ensure more people can more equitably and sustainably access health care.

Now at the end of our second year, we are building momentum and acting on the important groundwork laid in our first year. We have catalyzed more than 40 commitments from our members to launch new NCD efforts or scale existing interventions. Partnerships with City Cancer Challenge (C/CAN), NCD Alliance, PATH, World Bank Group and World Heart Federation are working to strengthen health systems in a set of initial focus countries, while building shared resources and tools that can be applied to strengthen our efforts across all LMICs.

Most importantly, we have connected with the NCD community – private sector, governments, people living with NCDs (PLWNCDs), civil society, development agencies and health delivery organizations – and learned more about how we can work together to co-create solutions for NCDs, in support of efforts to achieve UHC.

As we look ahead to our third year and beyond, we remain committed to bringing our collective knowledge, experience, tools and resources to support scalable and sustainable NCD solutions.

We thank our partners and look forward to continued collaboration in the coming years.

---

¹ The rise of non-communicable diseases in low- and middle-income countries, World Health Organization, 2017.
Access Accelerated At-A-Glance

22 BIOPHARMACEUTICAL COMPANY MEMBERS

JOINING FORCES WITH FIVE GLOBAL IMPLEMENTATION PARTNERS

C/Can City Cancer Challenge
PATH

FOCUSING COLLECTIVE EFFORTS IN THREE INITIAL PRIORITY COUNTRIES

KENYA
GHANA
VIETNAM

90 PROGRAMS ACTIVELY ADDRESSING NCD PREVENTION, TREATMENT AND CARE

WORKING TO ACHIEVE THE UNITED NATIONS SUSTAINABLE DEVELOPMENT GOALS:

• Target 3.4: Reduce premature deaths from NCDs
• Target 3.8: Universal Health Coverage
• Goal 17: Partnerships for the Goals

99 LOW- AND MIDDLE-INCOME COUNTRIES

ALIGNED WITH GLOBAL ACTION FRAMEWORKS

• World Health Organization NCD Framework
• Political Declaration: Third UN High-Level Meeting on NCDs
“The work Access Accelerated is doing in trying to bring patients close to treatment, to cures, to rehabilitation, to palliative care, is urgently needed. It is desperately needed. It is time we put action at the forefront of public policy.”

DR. SANIA NISHTAR
Co-Chair, WHO High-Level Commission on NCDs, and Chair, Poverty Alleviation Coordination Council, Pakistan
Who We Are

When Access Accelerated launched in 2017, the biopharmaceutical industry stood together for the first time and made a bold commitment to help achieve the ambitious agenda laid out in the UN Sustainable Development Goals. The Access Accelerated CEO Pledge (page 45) guides the initiative’s approach to fighting a complex global health crisis.

Individually, each member company brings a legacy of programs, knowledge and experience working to increase access to NCD prevention, treatment and care, but we know that for a problem of this magnitude, we need new ways of working together. We also know that we must evolve traditional models of multi-sectoral partnerships and demonstrate how the industry contributes more than just money or medicines to global health solutions.

Access Accelerated remains true to this vision and true to our spirit of partnership – listening to the needs and priorities of others and adapting and optimizing our activities to respond to those needs.
VISION
A future where no one dies prematurely from treatable, preventable NCDs.

MISSION
Drive private sector engagement in accelerating NCD prevention, treatment and care globally.

ACTION AREAS
- Scale-up and strengthen biopharmaceutical industry contributions for greater health impact.
- Drive sustainable solutions via robust multi-sectoral partnerships.
- Enhance value and reduce fragmentation of NCD programming through a collective approach.

CROSS-CUTTING PRINCIPLES
- Patient-Centered Approach
- Strong Local Ownership & Engagement
- Substantive Partnerships
- Sustainable, Equitable Solutions
- Innovation & Continuous Learning
- Rigorous Measurement & Transparency

GOAL
Support the United Nations Sustainable Development Goal 3.4 to reduce pre-mature mortality from NCDs by one-third by 2030.
Insights & Reflections from 2018
Understanding Our Context: Global Momentum Toward UHC

In working with our member companies, partner organizations, country governments, people living with NCDs in LMICs, and other key stakeholders, one imperative has become overwhelming clear: our approach to NCDs must be aligned with and anchored in global momentum to achieve UHC.

Country governments are leading the effort.

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

There is much work to be done to strengthen health systems.

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

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

Global experiences to date demonstrate that genuine, effective and durable multi-stakeholder partnerships can play an important role in supporting country-driven strategies and are effective mechanisms to mobilize human and financial resources, expertise, technology, and knowledge. We understand that governments cannot achieve UHC alone; UHC requires innovation and collaboration among all relevant sectors of society including academia, health care providers, PLWNCDs, NGOs and the private sector. Partnerships with the private sector can help bring the full advantage of new technological advances and drive sustainable change in health systems by improving efficiency and effectiveness and bringing programs to scale.

The World Health Organization defines UHC as:

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

Reference: https://www.who.int/health_financing/universal_coverage_definition/en/
INSIGHTS & REFLECTIONS FROM 2018

We have evidence-based solutions.
In working to expand access to NCD prevention, treatment and care through UHC, there are a number of key priorities based on experiences to date:

Primary health care:
Quality primary health care is a critical priority in developing UHC systems and required to achieve sustainable, equitable access. Primary health care reaches people living with or at risk for NCDs in the place where they are, with the services they need and acts as a natural entry point for delivering integrated care.

Information sharing and evidence-informed responses:
There is a need to challenge health systems and programs to assess progress based on the results they deliver to people and make a better use of health data.

Patient-centred approach:
UHC and health systems must be people-centred; the involvement of patients in health system processes and governance is critical to achieving UHC.

“*We need all sectors to come together and the pharmaceutical industry too, so that we look at these diseases from a multi-sectoral perspective. There are so many little activities that are either pharma-led or government-led or NGO-led, but there hasn’t been a coordinated punch in denting the NCD burden. Years ago, the future was bleak but now there’s a light at the end of the tunnel. I’m happy that the future is starting to build around partnerships because that’s the only way that we will be able to do something about NCDs.”*

DR. JOSEPH KIBACHIO
Head, NCD Division of the Ministry of Health, Kenya

“The NCD Alliance’s partnership with Access Accelerated taps into the very core of our work, which is about putting people first in the response to NCDs and pursuit of UHC. Efforts in Kenya have set foundations for the future by developing a model to produce a National Advocacy Agenda of People living with NCDs that can help drive sustainable action and be applied to other countries.”

KATIE DAIN
Chief Executive Officer, NCD Alliance

9 | 2018 Access Accelerated: Year 2 Report
What this Means for Access Accelerated

OVER THE LAST TWO YEARS, WE HAVE CONTINUED TO FIND NEW WAYS TO PURSUE OUR OBJECTIVES MORE EFFECTIVELY AND IN ALIGNMENT WITH UHC, LEARNING FROM OUR MEMBERS AND PARTNERS.

PROGRAMS

Our Ambition:
Catalyze a scale-up of new and existing company programs to increase access to NCD prevention, treatment and care for underserved populations across the world.

Our Approach:
Access Accelerated is actively working to strengthen how our members approach programs by identifying common principles of strong program design aligned with UHC, including local ownership and engagement, sustainability, equity and a patient-centered approach.

PARTNERSHIPS & PLATFORMS

Our Ambition:
Undertake pilot programs to test ways to improve the treatment of NCDs and strengthen health systems in low- and middle-income countries; partner broadly to understand the full range of access barriers.

Our Approach:
In building out our global partnerships, we are (1) developing a country-level engagement model in an initial set of three countries (Kenya, Ghana and Vietnam) where we connect our efforts directly to government UHC strategies and priorities; and (2) orienting partner work around core UHC priorities, namely supporting evidence-building, a shared agenda for collective action and primary care as a priority area for health system strengthening.
Our Path

Access Accelerated builds on a long legacy of global multi-sectoral initiatives to address pressing health challenges. In addressing NCDs – as we have worked to tackle other challenges in the past – we recognize the importance of a new, cross-cutting focus: alignment with global momentum to achieve UHC.

2000: The launch of the Millennium Development Goals (MDGs), the precursor to the SDGs, at the UN Millennium Summit.

2000: Gavi, the Vaccine Alliance launches as an innovative public-private partnership.xxxi

2000: The Accelerating Access Initiative, comprised of five biopharmaceutical companies and five UN partners comes together to address HIV/AIDS.xxvi xxvi

2002: The Global Fund to fight AIDS, TB, and Malaria established.xxxii

2001: The UN makes a Declaration of Commitment to addressing HIV/AIDS.xxxi

2006: The UN hosts the first High-Level Meeting on HIV/AIDS.xxxii

LEGEND

- **NCDS**
- **NEGLECTED TROPICAL DISEASES (NTDS)**
- **VACCINES**
- **COMMUNICABLE DISEASES**
- **SDGS & UHC**
2011: The UN hosts the first High-Level Meeting on NCDs.

2011: The International Federation of Pharmaceutical Manufacturers and Associations (IFPMA) launches the “Framework for Action for the Prevention and Control of NCDs.”

2011: The UN hosts their second High-Level Meeting on HIV/AIDS.

2012: The WHO releases “Accelerating Work to Overcome the Global Impact of Neglected Tropical Diseases: Roadmap for Implementation”.

2012: “The London Declaration on Neglected Tropical Diseases” is drafted and signed.


2014: The UN hosts the second High-Level Meeting on NCDs.

2014: The biopharmaceutical industry, led by IFPMA, comes together to support the achievement of UHC through a set of key public policy principles.

2015: Inauguration of the Sustainable Development Goals.

2015: NCDs are included as a specific target of SDG Goal 3 with a call to reduce premature mortality from NCDs by one third by 2030.

2017: Access Accelerated launches, representing a commitment by the biopharmaceutical industry to expand access to NCD prevention, treatment and care, while collectively engaging in multi-sectoral partnerships.

2018: The UN hosts the third High-Level Meeting on NCDs.

2019: The UN hosts High-Level Meeting on UHC.
Progress to Date & Next Steps
Global Overview

LEGEND
- Countries with active Access Accelerated Member Company programs and partnerships
- C/Can Key Learning Cities
- Access Accelerated focus countries
Active Access Accelerated Partnerships: Global

**Work with Country Partners:** In 2018 NCD Alliance worked with country partners – Ghana NCD Alliance and NCD Alliance Kenya - to promote the meaningful involvement of PLWNCDs.

**Our Views, Our Voices Train the Trainer Program:** Support for PLWNCD champions and NCD Alliance representatives from seven countries including Kenya, Ghana and Vietnam. Trainers learn how to build the skills, knowledge and expertise needed for individuals to become effective NCD patient advocates and spokespersons (2019).

**PATH**

**NCD Navigator:** A first-of-its-kind, NCD digital information system which provides real-time data on NCD programming in Kenya to meet the complex needs of PLWNCDs. As the model is designed to be globally relevant and locally adapted, it will be scaled to Ghana and Vietnam.

**Access Solutions for Innovative Medicines:** Development of resources aimed at reducing access barriers for important new medicines that often are out of reach for patients in LMICs.

**Regulatory Harmonization:** Support for priority regulatory strengthening and harmonization issues.

**El Salvador:** Ongoing pilot of integrated service delivery model for primary care level prevention, early detection, and treatment of NCDs. Systematic screening of women for cervical cancer; HPV vaccination for girls. Discussions with government about a country-wide scale-up under a new World Bank operation.

**Colombia:** Comorbidity study for policy makers to understand impact of NCDs on patients suffering from other conditions in the broader health system. Dissemination pending in 2019; policy dialogue led to preparation of a $200 million USD loan to strengthen the Colombian health system and improve access to quality NCD services.

**China:** Technical support and learning exchange to strengthen quality of NCD services in two provinces, connecting with national and international expertise.

**Launch of Challenge Cities:** Building on the original set of four Key Learning Cities, C/Can is opening up an opportunity to other global cities that wish to apply the collaborative model to strengthen cancer care services. During the World Health Assembly in 2018, it was announced that the cities of Porto Alegre, Brazil and Kigali, Rwanda had been selected to join the initiative as Challenge Cities.

**Launch of City Health Financing Lab:** A network of prospective investors, government and development partners for engagement to address priority projects for Key Learning Cities.

**Identifying Policy and Governance Priorities for Cardiovascular Health:** Data collection and progress assessment in 16 African countries chosen for their high burden of cardiovascular diseases (publication anticipated for 2019).

**Global Summit on Circulatory Health:** Convening of annual meetings for leaders shaping the future of cardiovascular health to network, debate and catalyze action through policy engagement.

**New NCD Roadmaps:** Development and launch of dissemination tools for three new topical Roadmaps on Cardiovascular Diseases in People Living with Diabetes, Chagas Disease and Heart Failure (coming in 2019).

**Colombia:** High-level roundtable on hypertension to develop a national action plan on relevant cardiovascular disease prevention and management (coming in 2019).
## Focus Countries

### Kenya

**NCD Alliance:** National workshops and capacity building led by NCD Alliance Kenya to facilitate the meaningful involvement of PLWNCD in the NCD policy-making and health systems strengthening processes, as well as in civil-society led action on NCDs and the development of the Advocacy Agendas of People Living with NCDs in Kenya.

**PATH:** Mapping ongoing activities in the NCD space in Kenya to support greater alignment and less duplication amongst future programming; end-to-end supply chain mapping of NCD commodities to identify barriers and opportunities for action (2018-2019). Working towards coordinated action to avoid duplication and seize opportunities to better meet the needs of PLWNCDs (coming in 2019).

**World Bank:** A pilot launched jointly by the World Bank, AMPATH, the Ministry of Health for Kenya and Access Accelerated to test models for integrated NCD care at community and primary care levels in four counties, informing scale-up as part of Kenya’s UHC ambition.

**World Heart Federation:** Stakeholder roundtable on hypertension and cardiovascular disease, resulting in a Call to Action for Kenya outlining priority short-term actions. Through 2019, WHF will also disseminate and monitor the uptake of the new National Guidelines for Cardiovascular Disease Management.

### Ghana

**NCD Alliance:** Working with Ghana NCD Alliance, convened people living with NCDs to build the Ghana Advocacy Agenda of PLWNCDs *(to be launched in 2019)* and discuss multisectoral action on NCDs.

**PATH:** Mapping ongoing activities in the NCD space to support greater alignment and less duplication amongst future programming; end-to-end supply chain mapping of NCD commodities to identify barriers and opportunities for action; and determining specific indicators to be included in the next Demographic and Health Survey (DHS) to improve national estimates of NCD prevalence *(coming in 2019).*

**World Bank:** Working with the Ministry of Health to build evidence to inform action on NCDs by gathering population-based data on burden of disease through the WHO’s STEpwise survey methodology and review of Ghana’s NCD strategy *(2019).*

**World Heart Federation:** High-level roundtable on hypertension to develop a national action plan on relevant cardiovascular disease prevention and management *(coming in 2019).*

### Vietnam

**NCD Alliance:** Seed-grant and technical assistance to the national NCD Alliance in Vietnam to support a consultation of PLWNCDs to identify main issues faced with the aim of linking findings into UHC global discussions and inform national efforts *(coming in 2019).*

**PATH:** Expanding elements of a pilot (previously tested in collaboration with the Novartis Foundation) for community-based hypertension prevention and care services, now to include diabetes *(coming in 2019).*

**World Bank:** Preparation of a $105 million USD operation to improve use and quality of essential NCD health services at grassroots and community levels countrywide *(approval expected June 2019).*

**World Heart Federation:** High-level roundtable on hypertension to develop a national action plan on relevant cardiovascular disease prevention and management *(coming in 2019).*
C/Can Key Learning Cities

C/Can was launched by the Union for International Cancer Control (UICC) at the 2017 World Economic Forum Annual Meeting in Davos as a coordinated response to the urgent need to support resource-limited countries in reducing their growing cancer burden. To this end, a small group of Key Learning Cities were selected based upon a rigorous set of criteria including the potential to provide insights on how the international community, local civil society and the public sector can best work together to implement the shared ambition of the city and C/Can.

Asunción, Paraguay
In 2018, Asunción completed a needs assessment and initial activity plans, and is now ready to engage partners who can provide technical expertise and input to refine plans.

Cali, Colombia
In 2018, Cali completed a needs assessment, prioritized objectives for cancer care delivery and developed activity plans. AFIDRO, the pharmaceutical industry association, has agreed to join efforts and provide funding and technical assistance to assess priority needs. Cali was also chosen as a pilot city for C/Can’s City Health Financing Lab.

Kumasi, Ghana
In 2018, Kumasi finalized the needs assessment process and shared a situational analysis report with key partners, including Access Accelerated.

Yangon, Myanmar
In 2018, Yangon completed a comprehensive needs assessment and initial activity plans, with a first set of technical assistance activities currently underway. Yangon was also chosen as a pilot city for C/Can’s City Health Financing Lab.

“The City Cancer Challenge model is already changing the way stakeholders from public and private sectors cooperate and collaborate with non-governmental actors to drive political commitment to cancer control at all levels of government, and build international support for implementing effective and targeted capacity-building for the health workforce.”

PROFESSOR SANCHIA ARANDA
Board Chair, City Cancer Challenge Foundation
Access Accelerated Action Areas
Action Areas Overview

**ACTION AREA**

*Scale-up and strengthen industry contributions for greater health impact.*

**ACTION AREA**

*Drive sustainable impact via robust multi-sectoral partnerships.*

**ACTION AREA**

*Enhance value and reduce fragmentation of NCD programming through a collective approach.*
ACTION AREA: SCALE-UP AND STRENGTHEN INDUSTRY CONTRIBUTIONS FOR GREATER HEALTH IMPACT

We pledged to scale up our NCD activities and collectively strengthen program quality and effectiveness.

Access Accelerated is catalyzing new and existing public-private partnerships to increase access to NCD prevention, treatment and care in low- and middle-income countries. Our member companies are committed to find new ways to address gaps in access, share key learnings and advance solutions.

Through 2018, we have made a number of important advances in strengthening our collective efforts on NCDs. (see page 35 for details on recent program updates)

Scaling Our Impact

Our member companies joined Access Accelerated with a clear commitment to scale the reach and improve the effectiveness of their existing NCD access programs. Since Access Accelerated launched in January 2017, we have introduced or extended 40 company NCD access programs – bringing our total to 90 active initiatives. These programs tackle a wide range of barriers to care, and positively impact people living with NCDs in 99 countries.

Strengthening Program Design and Implementation

In 2018, we began an important process of defining how we hope to collectively improve the work we do around NCDs, developing and implementing more effective and collaborative projects. We defined the following set of cross-cutting principles to guide the design and implementation of NCD initiatives that are innovative, sustainable, locally-owned and responsive to the needs of PLWNCDs.

Patient-centered approach:

Respond to and respect patients’ expressed values, preferences, and desired health outcomes, meaningfully engaging PLWNCDs to become active participants in their health and wellbeing.

Strong local ownership and engagement:

Foster collaboration and open communication with local stakeholders at all stages of program development, execution and evaluation.
Our principles encapsulate our vision to continuously improve the quality and effectiveness of our work in alignment with these values. They are based on thorough review of expert literature, including research and position papers published by key stakeholders, as well as insights and experiences from member companies and our partners.

As a first step, we anticipate the 2019 publication of the first edition of Access Accelerated in Action: Key Learnings in Program Design & Implementation, a report on our members' experiences in NCD initiatives to date. The report presents a series of case studies, extracting successes and lessons learned to inform future program development. Following this initial publication, we hope to actively engage with our members, partners, and the broader community of NCD stakeholders around these principles, continuing to refine our understanding of how we can work together effectively to advance NCD care.

Reporting Program Results

A commitment to independent, robust metrics and evaluation is central to Access Accelerated, and we have brought a strong initial focus to supporting our members as they implement the principle of rigorous measurement and transparency. We have partnered with Boston University to develop a common approach to how we report program details and monitor results across our individual company initiatives. In 2018, Boston University’s independent Access Observatory provided its first public report on Access Accelerated program information and data, with over 60 programs reporting. Available on the Access Observatory, individual program reports provide a description of each program, including country of operation, disease focus, access strategies and activities, and target populations. Member companies have submitted data on NCD initiatives to Boston University for 2017 and 2018, and a Year 2 report is expected in Q2 2019.

Sharing Our Work

In 2018, we launched the Access Accelerated Open Platform. This innovative interactive resource allows users to navigate across current biopharmaceutical industry initiatives on NCDs, including initiatives reported to the BU Access Observatory, and is intended to enhance opportunities for future collaboration. We created this resource because we know that sharing knowledge and information is critical; we hope the Platform can help our partners and stakeholders to understand and explore our diverse NCD efforts, identify synergies, and maximize effective use of resources.
“Biopharmaceutical companies regularly report to shareholders and the public on financial performance, clinical trial results, and product quality and safety metrics. Company-led access programs should be no different. The Access Observatory serves as a platform for biopharmaceutical companies to demonstrate their commitment to measurement and transparent reporting on their access programs. There is great potential for the industry, as a whole, to learn from successful and innovative access programs, but this requires a willingness to collect data, share insights and experiences, and finally to publish results.”

DR. RICHARD LAING
Professor, Department of Global Health, Boston University School of Public Health

<table>
<thead>
<tr>
<th>Strategy</th>
<th>Count</th>
<th>% of Total (N=73)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Service Strengthening</td>
<td>59</td>
<td>80.8%</td>
</tr>
<tr>
<td>Community Awareness &amp; Linkage to Care</td>
<td>58</td>
<td>79.4%</td>
</tr>
<tr>
<td>Health Service Delivery</td>
<td>39</td>
<td>53.4%</td>
</tr>
<tr>
<td>Price Scheme</td>
<td>10</td>
<td>13.7%</td>
</tr>
<tr>
<td>Medicine Donation</td>
<td>7</td>
<td>9.5%</td>
</tr>
<tr>
<td>Financing</td>
<td>3</td>
<td>4.1%</td>
</tr>
<tr>
<td>Supply Chain</td>
<td>3</td>
<td>4.1%</td>
</tr>
<tr>
<td>Regulation &amp; Legislation</td>
<td>2</td>
<td>2.7%</td>
</tr>
<tr>
<td>Manufacturing</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Product Development Research</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Licensing Agreement</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Multiple strategies</td>
<td>62</td>
<td>84.9%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Disease Category</th>
<th>Count</th>
<th>% (N=73)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cancer</td>
<td>46</td>
<td>63.0%</td>
</tr>
<tr>
<td>Diabetes</td>
<td>13</td>
<td>17.8%</td>
</tr>
<tr>
<td>Cardiovascular Disease</td>
<td>13</td>
<td>17.8%</td>
</tr>
<tr>
<td>Mental &amp; Neurological Disorders</td>
<td>8</td>
<td>10.9%</td>
</tr>
<tr>
<td>General NCD Care (Health System)</td>
<td>8</td>
<td>10.9%</td>
</tr>
<tr>
<td>Respiratory Disease</td>
<td>4</td>
<td>5.4%</td>
</tr>
<tr>
<td>Other NCD</td>
<td>15</td>
<td>20.5%</td>
</tr>
<tr>
<td>Other non-NCD</td>
<td>4</td>
<td>5.4%</td>
</tr>
</tbody>
</table>
We pledged to find new ways to address gaps in access, share key learnings and advance solutions.

Addressing the scale and complexity of the NCD challenge requires deeper and stronger collaboration. Through listening, learning and acting together with our partners, we are developing robust partnerships that will build knowledge, capacity and tools for long-term, sustainable NCD care.

**Primary Care Integration**

We are partnering with the World Bank on health systems strengthening initiatives in Kenya, Vietnam, China, Ghana and El Salvador. In these countries, we are piloting models to integrate NCD services at the primary care and community levels, and sharing lessons of what works and can be scaled for other countries.

**Evidence for Impact**

As part of our partnership with the World Bank, we also are contributing to evidence-based decision-making by supporting policy makers to better understand the burden of NCDs on the health system.

For example, in Ghana we have supported the first-ever population-based study to assess the prevalence of NCDs and NCD risk factors, using the WHO’s STEPwise methodology. In Colombia, we supported a comorbidity study for policy makers to better understand the impact of NCDs on patients suffering from other conditions and the cumulative effects on the broader health system.

**Amplifying Leadership of PLWNCDs**

NCD Alliance is a unique civil society network and unites 2,000 advocacy organizations in more than 170 countries. With NCD Alliance, we are supporting global efforts to elevate the voices of PLWNCDs in our Focus Countries and beyond through development of country-level and global Advocacy Agendas of PLWNCDs and participating in multi-stakeholder platforms to promote patient empowerment.

**Solutions for Cancer and Hypertension**

We are partnering with leading global institutions to develop models for multi-sectoral collaboration on two major NCDs – cancer and hypertension.
Access Accelerated is a founding supporter of the City Cancer Challenge, a multi-sectoral initiative originally founded by the Union for International Cancer Control (UICC). This groundbreaking initiative is supporting cities designing, planning and implementing cancer treatment solutions. Through this initiative, four Key Learning Cities – Cali, Colombia; Asunción, Paraguay; Kumasi, Ghana; and Yangon, Myanmar – are collaboratively developing sustainable solutions to reduce inequalities in access to quality cancer care and improve health.

We are also partnering with the World Heart Federation (WHF) to support resources to guide country-level priority-setting on cardiovascular disease. To date, WHF has collected data and assessed progress in 16 African countries that have high burden of cardiovascular disease; this analysis will support data-driven decision making to promote better heart health outcomes. In Kenya, as part of our focus country engagement, WHF and local partner, the Kenya Cardiac Society, have supported collaborative development of a shared Roadmap to Reducing Cardiovascular Mortality through Hypertension Management and refreshed national hypertension guidelines.

“...the World Bank to offer more and faster support to countries that want to address their NCD burden, but need additional data or policy input. By enabling or supporting World Bank operations, Access Accelerated can leverage resources and generate much greater impact than direct investments would yield.”

ANDREAS SEITER
Global Lead for Private Sector, Health, Nutrition and Population, World Bank

PATH, an international nonprofit that advises and partners with public institutions, businesses, grassroots groups, and investors to solve the world’s most pressing health challenges, created the NCD Navigator, a dynamic mapping of NCD programs currently active across the country. The resource shows, for the first time, the scale of NCD programming within Kenya. It is a critical input to enable data-driven decision-making, inform priority policies, enhance collaboration and reduce program fragmentation. Government officials, non-governmental organizations and private sector companies can use NCD Navigator resource to get a comprehensive and real-time view of current NCD activities so they can better understand gaps and opportunities, create more effective programs, and ultimately, better meet the needs of people living with NCDs. The Kenya Ministry of Health will operate the NCD Navigator by the end of 2019. As the model is designed to be globally relevant and locally adapted, it will be scaled to Ghana and Vietnam.
We pledged to partner broadly to understand the full range of access barriers, adding value to current efforts and/or creating new initiatives where needed.

Across our work, we are connecting with key stakeholders at global and country levels, co-creating sustainable multi-sector platforms to promote collaboration, enhance impact and reduce fragmentation of NCD programming.

We know that sustainable progress on NCDs must be locally-owned and driven at the country level and built from the ground up to respond to specific needs. That is why Access Accelerated is focusing targeted efforts in three initial Focus Countries – Kenya, Ghana and Vietnam.

In our Focus Countries, we are testing and learning how we can most effectively leverage our industry’s powerful combination of knowledge, experience, tools and resources to tackle the full range of barriers to NCD care while also driving local ownership and ensuring long-term sustainability, aligned with nationally defined NCD priorities.

Our goal is to promote collaboration, enhance impact and reduce fragmentation of programming through this collective model for private sector engagement on NCDs. In each Focus Country, we seek to do the following:

• Align with government priorities and support national efforts to build sustainable access to NCD prevention, treatment and care services
• Connect with civil society advocates and PLWNCDs as key stakeholders in defining priorities and needs in context
• Concentrate our partnership efforts geographically, drawing on our partners’ complementary strengths to understand and address country-specific needs and priorities
• Build a collaborative network of member companies, partner organizations, and other key stakeholders to share knowledge and support a more coordinated collective response to NCDs

As we apply this approach in each Focus Country, in turn, we are learning from our experiences, bringing new knowledge to inform future engagements and strengthening our ability to be effective, responsive partners in promoting NCD health.
Our First Focus
Country: Kenya
IN 2018, ACCESS ACCELERATED LAUNCHED ACTIVITIES IN KENYA AS ITS FIRST FOCUS COUNTRY. KENYA WAS SELECTED AS A STARTING POINT FOR DEEPER ENGAGEMENT FOR TWO KEY REASONS:

Strong, dedicated country leadership actively expanding access to quality, affordable NCD services as part of a holistic UHC approach:

In recent years, driven by strong advocacy and policy leadership, Kenya has made significant progress in developing a robust national NCD strategy and driving action against it. President Uhuru Kenyatta has committed to expanding access to affordable health care as one of his key policy priorities, looking to achieve UHC nationwide by 2022. In December 2018, an initial UHC package – including core NCD services – was offered to an initial set of four counties. For Access Accelerated, engaging in Kenya represents an important opportunity to support a dedicated, active coalition of country-level leadership in driving concrete, sustained progress on NCDs over the long term.

Opportunity for Access Accelerated to strengthen access to NCD prevention, treatment and care:

Access Accelerated members have more active programs in Kenya than any other country, with 28 initiatives currently operating to address a range of NCDs. We saw a strong opportunity to work with our member companies and partners to collectively align efforts, leverage synergies and advance towards national NCD goals.
In March 2018, Access Accelerated partnered with Kenya’s Ministry of Health and NCD Alliance Kenya on a technical stakeholder convening, “Building Solutions to Patient Challenges in Non-Communicable Diseases”, to understand priorities and challenges in expanding access to NCD care, as well as the role that public-private partnerships can play in advancing progress. This event also served as a collaborative launch for Access Accelerated partnerships in Kenya.

“If I treat someone with cervical cancer, but they die of hypertension, I have done nothing. The population is our patient, not just the individual in front of me.”

Dr. Chite Asirwa, AMPATH’s Field Director of Oncology and Hematology, speaking at Building Solutions to Patient Challenges in Non-Communicable Diseases in Nairobi, March 2018

Over the course of two days, more than 300 attendees from all sectors, including civil society, government, industry, and patient advocacy groups discussed how to invest in sustainable long-term solutions and bring sectors together to have a greater collective impact to reduce NCDs.

The convening was also an important opportunity to engage Kenyan leaders. Stella Samboja, Kenya’s First Lady of Taita-Taveta County, dispelled myths and common misconceptions about NCDs, and talked about her efforts to correct these misconceptions in her community.

Nazi Kivutha, First Lady of Makueni County, shared her personal perspective on Makueni’s innovative UHC program, Makueni Care, and its efforts to provide health care coverage to residents.

The event concluded with the Ministry of Health reaffirming its commitment to UHC and addressing NCDs in Kenya. Since the national government develops policies and implementation occurs at the county level, it was an important accomplishment for our initiative to have substantial county representation as well.

During the convening, partners organized concurrent workshops, which advanced progress on a number of initiatives and activities that are continuing to add value, and laid the groundwork for future collaboration.
PATH Makes Progress on Critical Collective Action Resource

Many Ministries of Health and local partners express frustration at the lack of local data on NCD programming to inform priority-setting, coordinate efforts and track progress on NCD strategies to address the growing and complex needs of PLWNCDs.

With the collaboration of the Kenyan Ministry of Health and local stakeholders and in partnership with Access Accelerated, PATH has created NCD Navigator, a first-of-its kind, NCD digital information system which provides real time data on NCD programming in Kenya to meet the complex needs of PLWNCDs. Stakeholders can use NCD Navigator to explore active NCD initiatives, establish a common understanding of gaps, and work collectively to avoid duplication and seize opportunities to better meet the needs of PLWNCDs. The goal is simple: enable data-driven decision-making for more informed priority setting to advance NCD prevention and care that is aligned with the national NCD strategy and targeted to the needs of PLWNCDs.

NCD Navigator was designed to be globally relevant and locally adapted. Progress is already being made to scale efforts to Ghana and explore the need for a similar system in Vietnam.

“In many ways, Kenya is an ideal place to pilot a resource like this. It’s a country where a lot of companies and civil society organizations are already working on the ground. The lack of data and information related to NCD programs has led to fragmentation that can also mean wasted resources and misalignment with the Kenya National Strategy for the Prevention and Control of NCDs. It can be a challenge for the Ministry of Health to manage so many partners without real time data that shows who is doing what and where.”

HELEN McGUIRE
Global Program Leader for Noncommunicable Diseases, PATH
The World Heart Federation Advances Action on Cardiovascular Disease (CVD)

The World Heart Federation convened stakeholders with a roundtable event, “Accelerating Solutions to Hypertension Management,” that was held concurrent to “Building Solutions to Patient Challenges in Non-Communicable Diseases.” During the stakeholder event, the World Heart Federation adapted its Global Roadmap on Hypertension to the Kenyan context. The final report and Call to Action were released at the Prince Mahidol Award Conference in January 2019. It focuses on empowering people living with NCDs, establishing a national registry for NCDs, creating an enabling environment for task-sharing in the management of CVD, taxing unhealthy commodities, and redirecting the consequent revenues to the prevention and management of CVD and other NCDs.

As an initial step, in 2018 the Kenya Cardiac Society refreshed national guidelines for hypertension, to be disseminated in 2019. Hypertension is a major, growing health challenge in Kenya, responsible for over 50 percent of hospital in-patient admissions. The Call to Action lays out a clear, consensus-based set of priority actions in the short-, mid- and long-term, which will facilitate decisive action by policymakers and partners.

“*The burden of non-communicable diseases and cardiovascular diseases (CVD) is significant in Kenya, where heart diseases cause 25% of hospital admissions and 13% of deaths. A health challenge of this magnitude can only be tackled by forging strong partnerships. This is why, together with our local member, the Kenya Cardiac Society, we are working with committed partners in the Ministry of Health and in AMREF to disseminate the National Guidelines for the Management of CVDs to 2,000 health workers in 100 health facilities in five counties, with the aim of improving heart health outcomes for 10,000 patients. Together, we are pooling resources, technical expertise and knowledge on the ground to advance heart health in Kenya.*”

JEAN-LUC EISELÉ
CEO, World Heart Federation
NCD Alliance Kenya Defines the NCD Agenda

NCD Alliance and local chapter NCD Alliance Kenya convened 135 people during the March 2018 technical stakeholder convening to facilitate the meaningful involvement of PLWNCDs in NCD policy-making and health systems strengthening processes, as well as in civil-society led action on NCDs in Kenya. Through a two-day workshop, a broad group including PLWNCDs and caregivers, Kenyan Ministry of Health officials, country First Ladies, NCD Alliance of Kenya members and other stakeholders developed the Advocacy Agenda of People Living with NCDs in Kenya, a foundational document defining common priorities and goals.

The Agenda captures the needs and priorities of PLWNCDs in Kenya, supporting advocacy to ensure programs, policies and frameworks in Kenya – and globally – align with true challenges on the ground.

Through workshops and events, Access Accelerated supported NCD Alliance Kenya in bringing this critical message to Kenyan policymakers and stakeholders, Access Accelerated members and partners, and the global community via participation at the World Health Assembly and UN High Level Meeting on NCDs.

“What Access Accelerated is doing – and what I hope they will continue to do – is recognize the need and the gaps with public-private partnerships. The government can only do so much. Access Accelerated is supporting the people who are doing the right thing.”

DR. EVA NJENGA
NCD Alliance Kenya, Chairperson
Expanding to Ghana & Vietnam

GHANA
As we are expanding our programming in Ghana and Vietnam in 2019, we are taking learnings and insights from Kenya and evolving our model so that we continue to meet national and local priorities, while also leveraging the strength and expertise our industry can bring to NCD care.

Support national strategies to achieve UHC:
The World Bank will conduct the first-ever nationally-representative NCD risk factor survey alongside a comprehensive review of institutional data on NCDs. This will provide the basis for the government to develop a strategy for broadening access to NCD care in the Ghanaian health system.

In addition, PATH is establishing baseline information on the status of NCD-related health systems and policies, current NCD activities and programs and working to include specific indicators in the next Ghanaian Demographic and Health Survey. All of this will support Ghana in making evidence-based decisions on NCD priorities, reducing fragmentation, and encouraging sustainability and collaboration.

Engage civil society advocates and PLWNCDs:
We are supporting NCD Alliance Ghana to promote the meaningful involvement of PLWNCDs in policymaking and ensuring their representation in discussions about the broader agenda of NCD access, health systems strengthening and UHC.

Draw on partners’ complementary strengths to understand and address country-specific needs:
Through our partnership with PATH, Access Accelerated is also working to improve understanding of gaps in Ghana’s supply chain, supporting targeted, evidence-based projects to improve access to essential medicines and technologies across Ghana.
VIETNAM

Our work in Vietnam has potential to significantly increase access to NCD services and the number of patients who have access to appropriate, quality treatment.

Support national strategies to achieve UHC:

Access Accelerated is supporting a World Bank program, implemented by the government of Vietnam, to integrate NCD services at the primary level by upgrading facilities, changing regulations and training primary care health workers. To target specific priority challenges, Access Accelerated is also partnering with PATH to support implementation and scale-up of a pilot model for hypertension and diabetes care. This model, previously tested in partnership with the Novartis Foundation for hypertension, will integrate diabetes care into four districts of Ho Chi Minh City and work with the national government to support broader scale-up in 2020.

Engage civil society advocates and PLWNCDs:

Our patient-centered approach will also be a focus of programming to help promote the meaningful involvement of PLWNCDs in discussions about the broader agendas for NCD access, health systems strengthening and UHC.

Draw on partners’ complementary strengths to understand and address country-specific needs:

World Heart Federation will facilitate a CVD Roadmap Implementation Roundtable to convene key stakeholders to identify challenges and prioritize potential solutions to reduce mortality related to CVD. The WHF will also complete a CVD Scorecard for Vietnam. The CVD Roadmap helps countries and partners to identify barriers and align around priorities for action in reducing CVD-related mortality.
2018 Company Program Updates
Almirall

Almirall is a leading skin-health focused global pharmaceutical company that partners with health care professionals, applying science to provide medical solutions to patients and future generations. Their efforts are focused on fighting against skin health diseases and helping people feel and look their best. The company supports healthcare professionals by continuous improvement, bringing innovative solutions where they are needed.

Astellas

ACTION ON FISTULA™ was started in 2014 by a grant given to the Fistula Foundation from Astellas Pharma Europe Limited. The program’s aim is to help more than 4,500 individual women to access fistula treatment by 2020. The program is set to exceed this target, with 4,559 surgeries carried out to date, and has also established a fistula treatment network to extend access to services, with six treatment centers enrolled. As well as the outreach program that identifies and brings women in for treatment, the training provided to surgeons and nurses also makes the program sustainable. *As of January 2019.

“I thank ACTION ON FISTULA™ and Fistula Foundation so much for selecting me and giving me my training. Since qualifying, I have been able to perform surgery on over one thousand women”.

Dr. John Omboga. Qualified fistula surgeon trained through ACTION ON FISTULA™

Bayer

As part of the Access Accelerated Initiative, Bayer, together with the Medical School of the University of Hamburg in Germany, established a “Center of Excellence” for the diagnosis of deep vein thrombosis (DVT) at the Komfo Anokye Teaching Hospital in Kumasi (KATH), Ghana. The project aims to train healthcare professionals and strengthen the infrastructure of the public health sector in the country. Bayer has set up a pilot project in Ghana, which plans to enhance the management of cardiovascular diseases. The project will consist of trainings and workshops to enable local medical personnel to identify, diagnose, and treat patients with DVT. The program will introduce and establish standardized diagnostic and therapeutic methods for patients suspected of having DVT. Any knowledge gathered during this initial phase of the project will be shared with two peripheral hospitals in order to share experience and extend the measures to train further medical professionals.

“The DVT pilot project seeks to lay the foundation for quality DVT care in the Kumasi metropolis, and it is geared towards strengthening of human capacity. The enthusiasm and commitment of my colleagues from KATH is very impressive and we expanded the established DVT patient care to two district hospitals.”

Dr. Isaac Kofi Owusu. Head of Cardiology, Komfo Anokye Teaching Hospital Kumasi, Ghana

Bristol-Myers Squibb

Over the past 20 years, the Bristol-Myers Squibb Foundation Secure the Future® initiative has funded more than 240 projects in 22 African countries with an emphasis on community-based treatment support programs in the care of pediatric HIV; building health care infrastructure and strengthening health systems in the fight against HIV. The Foundation’s cancer programs, in support of Access Accelerated, are improving care for patients and providing access to early diagnostic and treatment services for lung and cervical cancer in Kenya, South Africa, Lesotho, eSwatini and Tanzania. Additionally, the Foundation’s landmark Global HOPE initiative will train an estimated 4,800 health care professionals and treat thousands of children in African countries focused on pediatric hematology-oncology.

“Parents see the positive outcome and now realize their children can be treated for what they thought was untreatable... specialists and the entire team around them – nurses, researchers, medical officers and administrative staff – are being trained in the region where they will be delivering care. This is a completely new way of doing things here.”

Dr. Joseph Lubega, Medical Director, Global HOPE Uganda.
Celgene

Celgene Cancer Care Links™ is a demonstration of Celgene’s commitment to improving the lives of patients worldwide. This grant program supports cancer healthcare capacity building in resource-constrained countries around the world. As part of this program, Celgene is collaborating with local communities and institutions focused on enhancing patient care and building sustainable cancer care systems. In 2018, Celgene selected 10 programs for funding and provided more than $1 million in total to expand essential cancer care services in countries in Africa, Latin America, and Asia.

Chiesi

Chiesi’s commitment to increase access to prevention, treatment and care for NCDs in low-and middle-income countries has been enriched through the partnership established by the Access Accelerated initiative. Indeed, the growing burden of NCDs can be only addressed through a powerful combination of knowledge, experience, tools, partnerships and much-needed resources in the fight against NCDs. The Chiesi Foundation is committed to reducing the suffering of patients affected by chronic respiratory diseases. Since 2014, the Foundation has promoted the GASP (Global Access to Spirometry Project) which aims to improve the diagnosis and treatment of patients affected by asthma and chronic obstructive pulmonary disease (COPD), and the management of the diseases both by the patients and their families. The first pilot project was supported in Guyana since 2014. In 2018 a new project was initiated in Peru.

Chugai

Since November 2018, Chugai’s Health Camp Against NCDs program, in support of Access Accelerated and in partnership with AMDA - MINDS (AMDA - Multisectoral and Integrated Development Services), has provided NCD
patients in rural villages located in the central-dry-zone of Myanmar support in mobile medical clinics. The program offers check-ups and follow-up treatments, as well as in-hospital care for patients in severe conditions, and educational healthcare courses. The details of the plans are determined at workshops facilitated by staff from the Ministry of Health and Sports and Meiktila General Hospital with the aim of tailoring services to the local needs of the community to create long-term impact.

**Daiichi Sankyo**

In 2015, Daiichi Sankyo created the Cultivating Healthcare Workers in China program to help improve access to medical services in six townships in the Yunnan province of China. By the end of 2018, the program trained 257 pediatricians, maternal and child health care doctors, and village health care workers to improve the capability of local pediatric care. To date, the program has educated 14,783 residents and established six community centres. The centers offer community members a space to share information about health and nutrition management, and also serves as a venue where preschool children can learn and play.

**Eisai**

In 2015, Eisai introduced its dementia awareness program, Remember I Love You, in China to help others gain a better understanding about dementia and encourage early diagnosis, appropriate treatment and a dementia-friendly community. Eisai also co-established the SNS platform, “Yellow Wristband,” a comprehensive application to provide education on dementia, simple self-assessment, drug compliance as well as a memory clinic list, in partnership with the China Population Welfare Foundation. In 2018, over 60,000 people visited the “Yellow Wristband” SNS platform and 1,800 people accessed the self-screening tool provided by the platform.

**Eli Lilly and Company**

Eli Lilly and Company, in partnership with The University of Pretoria, national and local health authorities, and external experts, launched the Tshwane Insulin Project (TIP), which is intended to make the full spectrum of diabetes care accessible at the primary care level in the city of Tshwane in South Africa. Ensuring effective prevention and effective treatment of diabetes and optimal glucose control close to the communities where people live who are affected by NCDs is a crucial component of helping South Africa achieve Universal Health Coverage. The program uses Lilly’s global health framework, which includes studying key research questions, reporting what works and what doesn’t, and then using the data to advocate for the scale up of the most effective solutions.

**Johnson & Johnson**

In 2018, Johnson & Johnson, in partnership with the Rwandan Ministry of Health and others entered into a series of long-term collaborations through the Rwanda Access to Mental Healthcare Partnership to (1) determine the prevalence and burden of mental disorders in Rwanda, (2) increase access to community-based mental healthcare, and (3) enable access to transformational schizophrenia medicines. Together, Johnson & Johnson has completed a first-ever national household mental health care survey; supported the 3-year scale-up of Partners in Health’s community-based mental healthcare model; developed a digital community health worker training platform with Viamo; provided risperidone through a competitive tendering process, and initiated the first Rwandan clinical studies to evaluate the use of long-acting injectables.

**Menarini Group**

The Menarini Group is committed to combating the rise of NCDs focusing its product portfolio on crucial areas such as pulmonology, heart disease and diabetes, and dedicating important resources to research and development projects in oncology and cardiovascular health. The company’s Medicine Donation Program in Sub-Saharan Africa aims to fill in gaps in medicine accessibility by providing therapeutic solutions to patients who otherwise would not have access to resources. With a territorial presence in over 100 countries, the Menarini Group is committed to educating health care professionals on NCD treatment and prevention of related complications, through training and sharing scientific information as an effective method to reach all corners of the world with a common goal of improving the lives of people living with NCDs.

“We of the biopharmaceutical sector play a crucial role in reducing NCDs by having the privilege of contributing our innovation, know-how and resources to make providing patients with access to life-saving prevention, treatment and care a global reality.”

Eric Cornut, Chairman, Menarini Group

**Merck**

Throughout 2018, Merck has increased awareness of thyroid diseases through its Integrated Thyroid NCD Care partnership program with the Philippines Department of Health and the Philippines Thyroid Association. Merck is committed to helping the Filipino community by promoting early diagnosis and access to medicines through online, radio, and print information campaigns. Additionally, the company often provides information on thyroid diagnosis and treatment on its Thyroid Aware website and participates in campaigns in support of International Thyroid Awareness Week (ITAW).
Novartis

Novartis Access offers a portfolio of medicines to address key NCDs including cardiovascular diseases, type 2 diabetes, respiratory illnesses and breast cancer. The portfolio is available to governments, NGOs and other public sector health care providers in lower-income countries at a price of USD 1 per treatment, per month. As of 2018, Novartis Access submitted products for approval in 27 countries, delivered 2,274,000 monthly treatments and helped 1,542,865 patients. Novartis also offers capacity-building activities to support healthcare systems in preventing, diagnosing and treating chronic diseases. Novartis has delivered over 3 million monthly treatments to five countries (Cameroon, Ethiopia, Kenya, Rwanda and Uganda) and signed agreements in four more (Nigeria, Pakistan, Colombia and El Salvador).

Pfizer

In Vietnam, the growing burden of NCDs is a public health priority; as part of its 2015–2025 NCD strategy, the Ministry of Health has been working to integrate basic NCD services at the community level in commune health stations (CHS). Responding to this need, the Pfizer Foundation* launched a program with FHI 360 and the Department of Health (DOH) of Ho Chi Minh City to improve access, quality, and coordination of diabetes and hypertension services at CHS. The Abundant Health program is designed to strengthen the capacity of existing health facilities and health workers. Hypertension and diabetes prevention, screening, treatment and management are integrated into community outreach and routine services offered at CHS. Abundant Health provides trainings for health care workers using a Collaborative Improvement Model, designed to support teams of health workers to integrate quality improvement as part of their everyday workflow. Following a successful initial phase of the project in a single district, FHI 360 and the DOH are extending the Abundant Health model to each of the city’s 24 districts in 2019–2020.

Roche

Breast cancer in Colombia is the most prevalent invasive tumour, with 13,000 new cases per year and an annual mortality of 3,700 deaths, half of them due to access barriers. Through more than 130 Pink Consulting Rooms in 63 cities, Roche has improved early detection and reduced time between diagnosis and treatment. Over 260,000 women have visited the specialised clinics, 7,353 have been diagnosed and treated for breast cancer. Almost 16,000 health care professionals have attended lectures or participated in online trainings. The following is completed: training health care professionals, identifying patients at risk or with a suspected cancer and follow-up. This project has become a gateway for many women to be diagnosed early with breast cancer, through greater coverage for a vulnerable population. It has given priority, integrity and quality, by health professionals trained and sensitized in the pathology, within an optimal patient journey. The program is endorsed by the Mastology Colombian Association.

Sanofi

The KiDS project is an educational program co-created by Sanofi and the International Diabetes Federation in collaboration with several international partners. The program was piloted in India and Brazil and is currently being expanded in eight countries. The KiDS project aims to foster a safe and supportive school environment for children with type 1 diabetes to help them manage their condition and avoid discrimination. The program also raises awareness of diabetes and the benefits of healthy diets and physical activities among all school-age children. Since 2018, the program has reached 45,000 children and approximatively 4,400 teachers and school staff, and has helped more than 100,000 children since its inception in 2013.

Shionogi

The Mother to Mother SHIONOGI Project collaborates with World Vision, an international humanitarian aid organization, to improve maternal and child health in Kenya, Narok County. The five-year program started in October 2015 and aimed to contribute to the reduction of maternal and child mortality and develop a sustainable community for the wellbeing of mothers and children. The program constructed health care facilities, implemented mobile clinics, provided training and education for health workers and the local community to improve access and quality of healthcare. Between 2015 and 2017, the number of patients visiting the health facility increased from 2,505 to 6,359. The number of women receiving antenatal care from skilled providers in the health facility increased from 94 in 2015 to 540 in 2018.
**Sumitomo Dainippon Pharma**

Sumitomo Dainippon partnered with NGO PH-Japan, local governments, and health centers, to improve health services for children under two in the Kampong Cham Province of Cambodia. The Promoting Sound, Child Growth Pilot Project, consists of training for community volunteers (Community Care volunteer for Mothers and New-born (CCMN)) to organize home visits for mothers and babies. During the home visits, the CCMN ensure that the children are up-to-date with their vaccinations and receive the growth monitoring at local Health Centre. Since 2018, the project provided 19 CCMNs training, and participants received 124 home visits and 93 food demonstrations.

**Takeda**

Cancer is the third highest cause of death in Kenya. Recognizing the urgent need to advance cancer training, Takeda worked with partners including the MoH and National Cancer Institute to create the National Integrated Cancer Care Curriculum. The curriculum includes innovative training courses and delivery methods combining in-person training with mobile and online learning to educate Primary Healthcare Practitioners (PHPs) and Community Healthcare Workers (CHWs). In 2018, the curriculum met its goal and trained 100 health care professionals and 500 Community Health Workers as well as improving cancer screening, diagnosis and palliative care treatment. In 2019, Takeda aims to provide training for 10,000 healthcare workers.

**UCB**

UCB works with Fracarita Belgium, an international NGO for development cooperation of the Brothers of Charity, which dedicates itself to the challenge of improving the health condition of the most vulnerable. In 2018, the tertiary neuropsychiatric hospital of Ndera in Rwanda offered over 28,000 consultations to persons living with neurological conditions, often traveling long distances to seek specialized care. Strengthening the neurology capacity is accomplished by a four-pronged approach: offering a Master of Neurology and training to physicians; continuing an epilepsy and depression co-morbidity research study, in the framework of an academic PhD program; pursuing epilepsy training of grass-root community health workers, and traditional healers by the Rwandan Organization Against Epilepsy; and offering community-based socio-economic based support activities to persons living with epilepsy.
Looking Forward to 2019
Access Accelerated is Just Getting Started

In our first two years, we worked tirelessly to bring together the private sector, our partners, governments, multilaterals, civil society and the patients we serve, to listen, learn, and strategically mobilize around a variety of barriers to NCD screening, care and treatment around the world.

We saw that this fight is so much more than just tackling disease. It is a global movement that requires all parties to not just come to the table, but to act together to create a more cohesive and collaborative health care ecosystem. It requires supporting countries in their quest to achieve UHC so that equitable, effective and sustainable health care is available to those in need. It requires the diverse approaches, broad expertise and commitment to the health of individuals, families and communities that the private sector can bring.

Access Accelerated will answer this call. In 2019 and moving forward, we will deepen our engagement in Kenya and take our focus country model to Ghana, Vietnam, and beyond. We will collaborate on pilots and partnerships aimed at strengthening local health care systems; upskilling health care workers; simplifying supply chains; breaking down silos in NCD screening, care, and control; and supporting country-led efforts to include NCDs in the basic package of care for its people. We will share learnings from our member companies and partners through our upcoming report Access Accelerated in Action, as well as collaborate with the broader NCD community to strengthen the evidence base around NCD successes and failures. We will advocate – globally and locally – for a continued focus and greater resources for NCDs. As the world convenes to address UHC at this year’s United Nation High Level Meeting in September, we will be there to support NCDs as an integral part of the agenda.

Access Accelerated is driving a movement for deeper, more sustainable multisector impact on NCDs. We continue to innovate and explore new models and partnerships to ensure that NCD care reaches patients, and that we remain an effective – and trusted – partner in addressing the full range of NCD barriers.

We invite you to join us in this effort.
Welcoming New Members
Ipsen

Ipsen, based in Paris, France, aims to improve lives through innovative medicines in oncology, neuroscience and rare diseases. Ipsen sells more than 20 medicines in 115 countries and has over 5,700 employees worldwide.

“Knowing that patients don’t have time to wait, Ipsen is delighted to team up with Access Accelerated. To benefit patients around the world, we’ll leverage our legacy and strong expertise to support better access to treatment and care.”

Dominique Laymand, Ipsen’s Executive Vice President, Ethics and Social Responsibility Chief Officer

Servier

Servier is an international pharmaceutical company committed to providing accessible quality healthcare to patients. Operating in 149 countries, Servier is focused on five major areas: cardiovascular, immune-inflammatory and neurodegenerative diseases, cancer and diabetes. With its participation in Access Accelerated, Servier intends to further expand its efforts to improve access to healthcare for people around the world.

“Servier is dedicated to therapeutic progress to serve patient needs. We have a social responsibility to improve access to health for patients. Servier’s participation to Access Accelerated will support this everyday commitment.”

Vincent Minvielle, Head of Servier Corporate Social Responsibility.
Access Accelerated CEO Pledge
Access Accelerated: Moving NCD Care Forward

We envision a future where no one dies prematurely from a treatable, preventable disease and all people living with or at risk of non-communicable diseases (NCDs) have access to appropriate, quality, and affordable prevention, treatments and care.

To that end, we commit to helping achieve the United Nations Sustainable Development Goals, and in particular, the target to reduce premature deaths from NCDs by one-third by 2030. NCDs, including cancer, cardiovascular diseases, chronic respiratory diseases, diabetes and mental health disorders are the leading causes of death and disability worldwide. Unless action is taken to reverse the trend, this burden is expected to rise significantly in developing countries in the coming decades.

Responding to the call of world leaders for the private sector to apply creativity and innovation to solve sustainable development challenges in the Sustainable Development Goals, we understand that the private sector, including the innovative healthcare and pharmaceutical industry has an important role to play in achieving the NCD goal. We can help improve the prevention, care and treatment of NCDs through our medicines and vaccines. With resources and capabilities we stand ready to work together toward our goal.

But, we cannot do this alone. Working together with partners like The World Bank Group, the Union for International Cancer Control (UICC), civil society, other international organizations and governments we can make measurable and sustainable progress against this rising incidence of NCDs particularly for aging populations in developing countries.

To achieve this, together and individually, we make the following commitments:

- Targeted pilots to address barriers. With a view to a broader scale-up, we will undertake pilot programs to test ways to improve the treatment of NCDs and strengthen health systems in low and lower-middle income countries. We will partner with the World Bank Group to accelerate access to care, medicines and technologies through sustainable and scalable solutions, with an initial focus on several country pilots supporting primary enablers of quality NCD care, including early screening, diagnosis and basic treatment. The World Bank Group will enhance these pilot programs at a country-level through their ongoing work with the government on financing, regulatory and other barriers to access.

- Expanded collaboration and partnerships. We will find new ways to address gaps in access, share best practices and advance solutions. As peers – and as competitors – this will not always be easy, but we believe our industry can work as one for the benefit of addressing these diseases. This will mean collaborating systematically and thinking beyond any one organization’s capabilities and initiatives.

- Seeking strength outside of ourselves. We will partner broadly to understand the full range of access barriers, adding value to current efforts and/or creating new initiatives where needed. We will listen carefully to develop effective partnerships that address access and availability in each of the major NCD areas, building on the individual strengths and capabilities of our partners.

- Disease specific partnerships. Our initial disease focus will be on cancer. We will join the Union for International Cancer Control (UICC)’s C/Can 2025: City Cancer Challenge as a foundational partner to support the development of effective, sustainable cancer care delivery models in select lower income cities. Through this partnership, we will work with other stakeholders to develop solutions at the local level to address disparities in access to cancer medicines and care. Other disease specific partnerships are possible in the future.

- Rigorous measurement and full transparency. We will work with independent experts at Boston University, the World Bank Group, UICC, and others to evaluate and share what works, what does not and what real-world impact our efforts have on NCDs with ongoing reporting.

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.


Gavi The Vaccine Alliance. Our History. Available at https://www.gavi.org/about/mission/history/


APPENDIX

References
Access Accelerated Secretariat

JAMES HEADEN PFIZER
Director

MARA NAKAGAWA-HARWOOD
Head of Implementation and Partnerships

MINJI KWAK
Project Manager

GWENDOLINE NAVARRO
Administrative Officer
Access Accelerated is a first-of-its-kind collaboration of more than 20 global biopharmaceutical companies working to reduce barriers to prevention, treatment and care for non-communicable diseases (NCDs) in low- and middle-income countries (LMICs). Launched in 2017, the initiative unites industry action and forges partnerships with country governments, civil society, multilaterals and non-governmental organizations (NGOs) to address the growing NCD burden.

We believe that to address the scale and complexity of the NCD challenge, all sectors must collaborate to strengthen health systems.

AND WE STAND READY TO DO MORE.

For more information visit our website: accessaccelerated.org
Follow us on Twitter: @NCDAccess
Explore the Access Accelerated Open Platform: aaopenplatform.accessaccelerated.org

Contact Information:
✉️ info@accessaccelerated.org
✉️ Chemin Des Mines 9 P.o. Box 195 1211 Geneva 20 Switzerland