



ACTION ON NCDs

How the innovative pharmaceutical industry helps bridge the care gap





“NCDs and their risk factors **reach well beyond health systems and affect all areas of society**, so they can only be addressed through an all-of-society approach. Everyone has a role to play – from diverse ministries like finance and environment, to civil society and people living with NCDs, to private sector and many others. **No one sector can tackle NCDs alone** – strong partnerships are the only way.”



KATIE DAIN
Chief Executive Officer, NCD Alliance

“Achieving a **25% reduction in major, non-communicable diseases by 2025** is an ambitious target. Strengthening healthcare systems to improve treatment for people living with NCDs will be central to success. Pharmaceutical companies are working to play their part, and the **Global Week for Action** is an opportunity to galvanize partnership across the global health community toward this aim.”



THOMAS CUENI
Director General, International Federation of Pharmaceutical Manufacturers & Associations (IFPMA)

Image: Healthy Heart Africa – Ghana community screening



EXECUTIVE SUMMARY

Across families and communities worldwide, non-communicable diseases (NCDs) are far from invisible. Whether we suffer from high blood pressure or mental health issues, or someone we know manages their diabetes care, has faced a cancer diagnosis, or is undergoing cancer treatment – NCDs impact all of us. Yet, global commitment and action to address the burden of NCDs is not on par with their impact on our everyday lives.

In the short time left on the **road to 2025**,¹ when global stakeholders will report back on progress to reduce NCDs by 25% at the UN High-level Meeting on NCDs, the global health community still has a lot of work to do to reduce the NCDs disease burden. Only by sharing our unique and collective expertise, ensuring coordination, and building meaningful, solution-oriented partnerships will we be able to strengthen and build resilient health systems, and offer better care to people living with NCDs.

In the spirit of the [Global Week for Action on NCDs](#), this report reiterates the long-standing commitment of the innovative pharmaceutical industry to bring innovative solutions, bridge the NCDs care gap, and accelerate Universal Health Coverage (UHC) and the 2030 Sustainable Development Goals (SDGs).

The report builds upon IFPMA’s [Framework for Action](#) for the Prevention and Control of NCDs, launched in 2011 and revised in 2015. It outlines four interconnected fronts that guide the innovative pharmaceutical industry’s action on NCDs:

- 1 **INNOVATION:** Investing in the discovery of new medicines and vaccines to prevent and fight disease.
- 2 **AVAILABILITY:** Promoting policies that drive expanded access to care.
- 3 **EMPOWERMENT OF PEOPLE LIVING WITH NCDs:** Ensuring the design and implementation of policy solutions are co-created with people living with NCDs.
- 4 **CAPACITY BUILDING:** Working with health systems and their funders to build capacity that can effectively prevent, diagnose, treat, and manage life-long conditions.

Progress depends on creating enabling collaborations and investments that prioritize overcoming the gaps and challenges likely to offer the biggest returns in our collective efforts to achieving global goals for NCDs and UHC in all countries around the world. Our industry puts forward the following policy recommendations:

FOSTER AN ENABLING ENVIRONMENT FOR INNOVATION AND ACCESS TO THRIVE



Ensure policies and regulations are in place to promote innovation, support clinical trials, and improve access to medicines and vaccines.

IMPROVE DATA GENERATION AND ANALYSIS OF THE NCD BURDEN TO LEAVE NO ONE BEHIND



Improve data systems and analysis of the NCD burden at global, regional, and national levels to identify and treat all people living with NCDs.

PUT MULTIPLE, SUSTAINABLE FINANCING MECHANISMS FOR NCDs IN PLACE



Develop sustainable and integrated financing mechanisms for NCDs within health systems that reflect each country's needs and capacity.

INTEGRATE NCD CARE



Promote awareness, health promotion, prevention, diagnosis, treatment, and care by integrating NCDs management into existing infrastructure and programs.

ENCOURAGE STRONGER MULTI-SECTORAL COLLABORATIONS



Increase participatory approaches able to integrate the expertise of all stakeholders.

Through concerted and collaborative action to address NCDs, the global health community, including the innovative pharmaceutical industry, can contribute to global health progress, improve lives, and regain the momentum we need for action on NCDs.

Image: reach52 – Philippines community screening



BRIDGING THE NCDs CARE GAP

NCDs pose a significant burden on health systems and societies, accounting for 74% of all global deaths. Of these 41 million deaths, of which 17 million are premature, the majority are in low- and middle-income countries (LMICs).²

NCDs also result in disability, reduced opportunities, and higher health-related expenditure, exacerbating the impact that NCDs have on households and national economies.³ This is not only due to the four main killers, namely cardiovascular diseases, cancers, chronic respiratory diseases, and diabetes, but also many other conditions, including liver, kidney, and thyroid diseases, as well as neurological diseases and mental disorders.

Progress on NCDs over recent years has been slow, with many countries lagging on their 2030 Sustainable Development Goal (SDG) targets,⁴ including UHC, which is at the heart of the health-related SDGs, and the foundation for improving health and well-being for all people of all ages.

Currently, most countries worldwide are unlikely to reach SDG 3.4, focused on reducing the NCDs global burden by one-third by 2030, in part due to the challenges they face in integrating NCDs into UHC benefit packages. Many LMICs are facing enormous gaps in access to NCD services across the continuum of care, including screening, diagnosis, treatment, rehabilitation, and palliative care. For example, half of adults living with diabetes are undiagnosed and unable to access insulin; hypertension is only under medical control for 1 in 5 people; and over 90% of cancer patients in low-income countries lack access to radiotherapy.⁵

The establishment of the WHO Global NCD Compact (2020–2030), which seeks to encourage Heads of State to adopt best-practice policies on the prevention and control of NCDs, and the United Nations Multi-Partner Trust Fund to mobilize domestic resources for NCDs and mental health in LMICs, both signal renewed political will and financial commitments to tackle NCDs. Yet, with the fourth UN High-Level Meeting on the prevention and control of NCDs fast approaching, we must take the road to 2025 united and at pace to strategically address key challenges and chart a way forward.



SUSTAINABLE DEVELOPMENT GOALS

Adopted by the United Nations (UN) in 2015, the SDGs are the blueprint to achieve a better and more sustainable future for all and are designed to engage all stakeholders, including the private sector, to address the world's most pressing global challenges.

SDG 3.4 on Good Health and Well-Being aims to achieve a one-third reduction in premature NCD deaths by 2030 and calls for stakeholders – including the innovative pharmaceutical industry – to collaborate across sectors, drive local programs, and advocate to help improve the well-being of people living with NCDs.

SDG 3.8 focuses on achieving Universal Health Coverage (UHC) for all. Addressing the needs of people living with NCDs is a fundamental part of realizing this goal while making sure that no one is left behind.

In 2011, the UN called on the private sector to contribute to efforts to improve access and affordability of NCD medicines and technologies.⁶ This call to action has since guided the innovative pharmaceutical industry's efforts and collaborations toward addressing the SDG targets 3.4 and 3.8.

Our publication, [Collaborating to achieve universal health coverage](#), provides an overview of the UHC2030 Private Sector Constituency (PSC) commitments toward UHC, and the innovative pharmaceutical industry's efforts to make these a reality.

THE ROLE OF THE INNOVATIVE PHARMACEUTICAL INDUSTRY

The innovative pharmaceutical industry is a dedicated partner to accelerate action and bridge the care gap on NCDs.

We recognize the importance of engaging in sustainably financed multi-sectoral and multi-stakeholder approaches to address the catastrophic burden caused by NCDs at the global level, and to achieve the SDGs by 2030, including UHC. That's why the innovative pharmaceutical industry has been working and will continue to work to provide innovative life-saving solutions, and collaborate with other actors so these products can reach people living with NCDs.

Our industry's activities to tackle NCDs have been guided by our [Framework for Action on NCDs](#), our response to the WHO's Global Action Plan on the Prevention and Control of NCDs (2013-2030). Since launching the Framework, IFPMA has built valuable alliances with hundreds of stakeholders to address NCDs through:

- 1 **INNOVATION:** Investing in the discovery of new medicines and vaccines to prevent and fight disease.
- 2 **AVAILABILITY:** Promoting policies that drive expanded access to care.
- 3 **EMPOWERMENT OF PEOPLE LIVING WITH NCDs:** Ensuring the design and implementation of policy solutions are co-created with people living with NCDs.
- 4 **CAPACITY BUILDING:** Working with health systems and their funders to build capacity that can effectively prevent, diagnose, treat, and manage life-long conditions.

1 INNOVATION

We are committed to constantly innovating for new and better products for NCDs management.⁷ Our industry develops life-saving and life-prolonging medicines to people worldwide, helping reduce premature mortality from NCDs, increasing patients' quality of life, and improving public health outcomes across countries and regions.

In the last 10 years alone, through inter-sectoral R&D efforts and partnership with academics and regulators, the innovative pharmaceutical industry has developed over 470 medicines⁸ to treat diseases such as cancer, cardiovascular diseases, and diabetes. Many more medicines and other health products in various stages of pre-clinical and clinical development are in the pipeline, with IFPMA members currently running over 3,700 clinical trials for cancer therapies and 450 ongoing trials on solutions for cardiovascular diseases.⁹ But we know that R&D and innovation without access makes no difference to people living with NCDs.

“Inadequate access to breast cancer treatment and care has exacerbated health inequities and undermines progress toward universal health coverage and the realization of the Sustainable Development Goals. GBCI is an initiative that has been built out of 20 years of work. Today, we are ready to take a framework to global action by collaborating with key partners to implement practices that, when put into action, will predictably reduce the burden of cancer worldwide.”

DR BEN ANDERSON
 Technical Lead for the Global Breast Cancer Initiative (GBCI), WHO

2 AVAILABILITY

To improve global health, investments in access are necessary. Health systems worldwide, especially in resource-limited settings, often fail to adequately ensure access to vaccines, diagnostics, medicines, and care to those who need them.

We are committed to strengthening health systems so that innovations reach populations faster. We partner with a wide range of stakeholders in support of medical donation programs and initiatives to bridge financing gaps in UHC schemes to reduce the human and economic burden of NCDs in low-resource countries. We also engage in projects to ensure an enabling and sustainable policy, regulatory, and delivery environment for the continuous supply and access to diagnostics and treatments for NCDs.

“With the CarePak, I did not experience the same challenges with diabetes management like before as I had everything I needed. I believe it could be helpful for other people living with diabetes.”

PERSON LIVING WITH DIABETES
 Beneficiary of PATH's Diabetes CarePak, Kenya

Image: Access Accelerated – Chronic Care Program in Sub-Saharan Africa





3 EMPOWERMENT OF PEOPLE LIVING WITH NCDs

Solutions to a problem as complex as NCDs cannot be one-size-fits-all. People living with NCDs require long-term care that is proactive, person-centered, community-based, and sustainable. Increasing health literacy and raising awareness on NCDs is a stepping stone toward the adoption of healthier lifestyles.

The input and contribution of people living with NCDs is essential to chart better self-management strategies and ensure the success of health promotion efforts. As an industry, we are committed to continuing to promote healthier lifestyles through innovative tools and initiatives. We collaborate in programs that seek to leverage the voices of people living with NCDs to guide and influence ongoing policy shifts for a better NCD response, provide self-management digital health tools, and train community health professionals to widen the reach of traditional health systems and make sure no one is left behind.

“Beyond providing free insulin, Changing Diabetes® in Children has served as a remarkable platform for raising awareness, enhancing the capacity of healthcare professionals, and ensuring holistic care for these young individuals.”

DR BEDOWRA ZABEEN

Consultant Paediatric Endocrinologist and Coordinator of the Changing Diabetes® in Children program

“I am so happy to get my height, weight, blood pressure, and blood sugar readings, as well as speak to a doctor. Usually, it is hard to get these different services and it costs a lot. After I joined the SAKAM project [reach52 project in Cambodia], I feel healthier with regular medication and eat less fried food.”

CHEA CHAN

Resident from Thlok Kambot Village, Prasat Bakong, Cambodia

4 CAPACITY BUILDING

For innovations to reach people and secure the best quality of care and health outcomes, health systems need to be ready to deliver quality health services, meet changing demands, and manage long-term conditions. As the pharmaceutical industry keeps innovating for NCDs, people living with NCDs need ready and resilient health systems that can absorb innovations safely and effectively and tailor care pathways to meet their needs.

Our industry is working with governments and global stakeholders to promote suitable policy environments through strengthening regulatory systems, promoting primary health care approaches and the integration of NCDs and infectious diseases’ care programs, as well as enhancing connections to build infrastructure and healthcare workforce capacity and resilience.

“Ghana Health Service has worked with Healthy Heart Africa program to increase awareness and demand for hypertension services by maximizing opportunities for screening and linking patients to care. I wish to express our gratitude for the program’s support in improving hypertension service delivery in the Ashanti Region and to emphasize the need to be aware of the dangers of elevated blood pressure, and to seek help when needed.”

DR PATRICK KUMA-OBOAGYE

Director General, Ghana Health Service



“Noncommunicable diseases are a complex issue that challenge the very limits of health systems around the world. Progress on NCDs relies on achieving UHC. Meaningful progress cannot happen in a silo. Addressing UHC and NCDs means engaging in deep collaboration and conversations across all sectors – public, private, and civil society.”

DR HAJIME INOUE

Advisor, Health, Nutrition, and Population program, World Bank Group

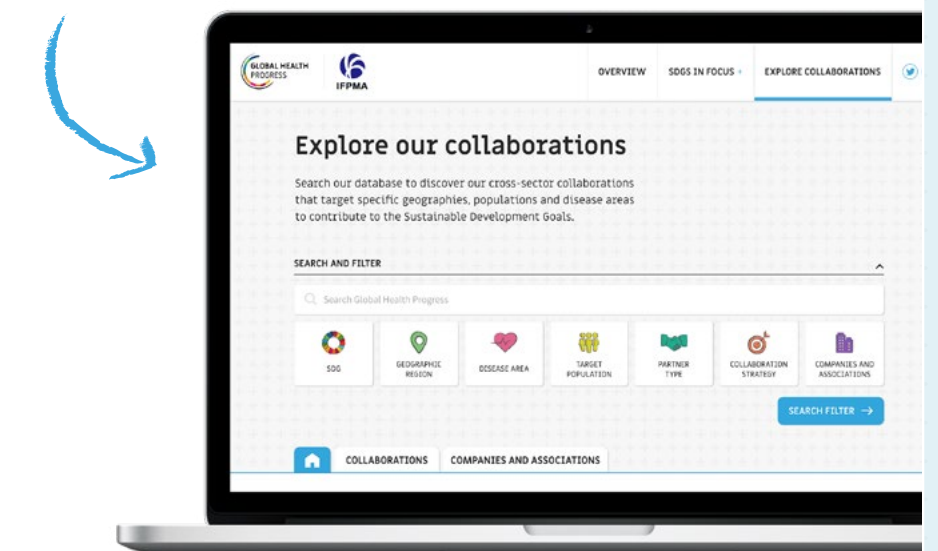
DISCOVER HOW THE INNOVATIVE PHARMACEUTICAL INDUSTRY IS EMBRACING PARTNERSHIPS TO ACCELERATE ACTION ON NCDs



Collaborating for a sustainable future

Global Health Progress is an interactive knowledge hub highlighting **over 300 active and completed collaborations** between the innovative pharmaceutical industry and multi-sectoral partners focused on accelerating action on NCDs, UHC, and other health and development global goals.

→ globalhealthprogress.org



OUR DIVERSE PARTNERS

FOR GLOBAL ACTION ON NCDs, WE COLLABORATE WITH DIVERSE PARTNERS, LEVERAGING THE STRENGTHS OF EACH PLAYER AND DEVELOPING TAILORED SOLUTIONS THAT REFLECT EACH COUNTRY'S HEALTHCARE NEEDS IN THE FIGHT AGAINST NCDs.



WE COLLABORATE ON NCDs WITH A DIVERSE RANGE OF ACTORS:



Global NGOs
56 programs



Governments
43 programs



Local NGOs
41 programs

OUR MOST COMMON PARTNERS ON NCDs PROJECTS ARE:



Direct Relief
8 programs



Ministry of Health of Kenya
7 programs



World Health Organization (WHO)
6 programs



13

of our NCDs collaborations include **more than one** IFPMA member company or trade association



84

of our programs are **multi-sectoral** collaborations

TAKING ACTION TO LEAVE NO ONE BEHIND

WHILE WE WORK ACROSS MANY DISEASE AREAS, NCDs ARE A KEY FOCUS, INCLUDING PROGRAMS ON:

Cancer

1 82 programs

Diabetes

2 43 programs

Cardiovascular diseases

3 30 programs

Chronic respiratory diseases

4 20 programs



OUR NCDs PROGRAMS CATER TO THE NEEDS OF A WIDE RANGE OF POPULATION GROUPS, INCLUDING:

People with low incomes

1 26 programs

Women

2 23 programs

Children

3 20 programs

People in rural areas

4 5 programs



USING DIVERSE APPROACHES TO IMPROVE HEALTH

WE WORK BEYOND R&D INNOVATION TO CLOSE THE NCDs CARE GAP IN COUNTRIES THROUGH HOLISTIC PROGRAMMING AND ACROSS PROGRAM STRATEGIES, INCLUDING:



Delivering therapeutic, diagnostic, screening, and preventive health services
77 programs



Infrastructure
13 programs



Strengthening health systems
44 programs



Financing
12 programs



Increasing community awareness and linking patients to care
40 programs



Developing technology and mHealth solutions
10 programs



Building health workforce capacity
34 programs

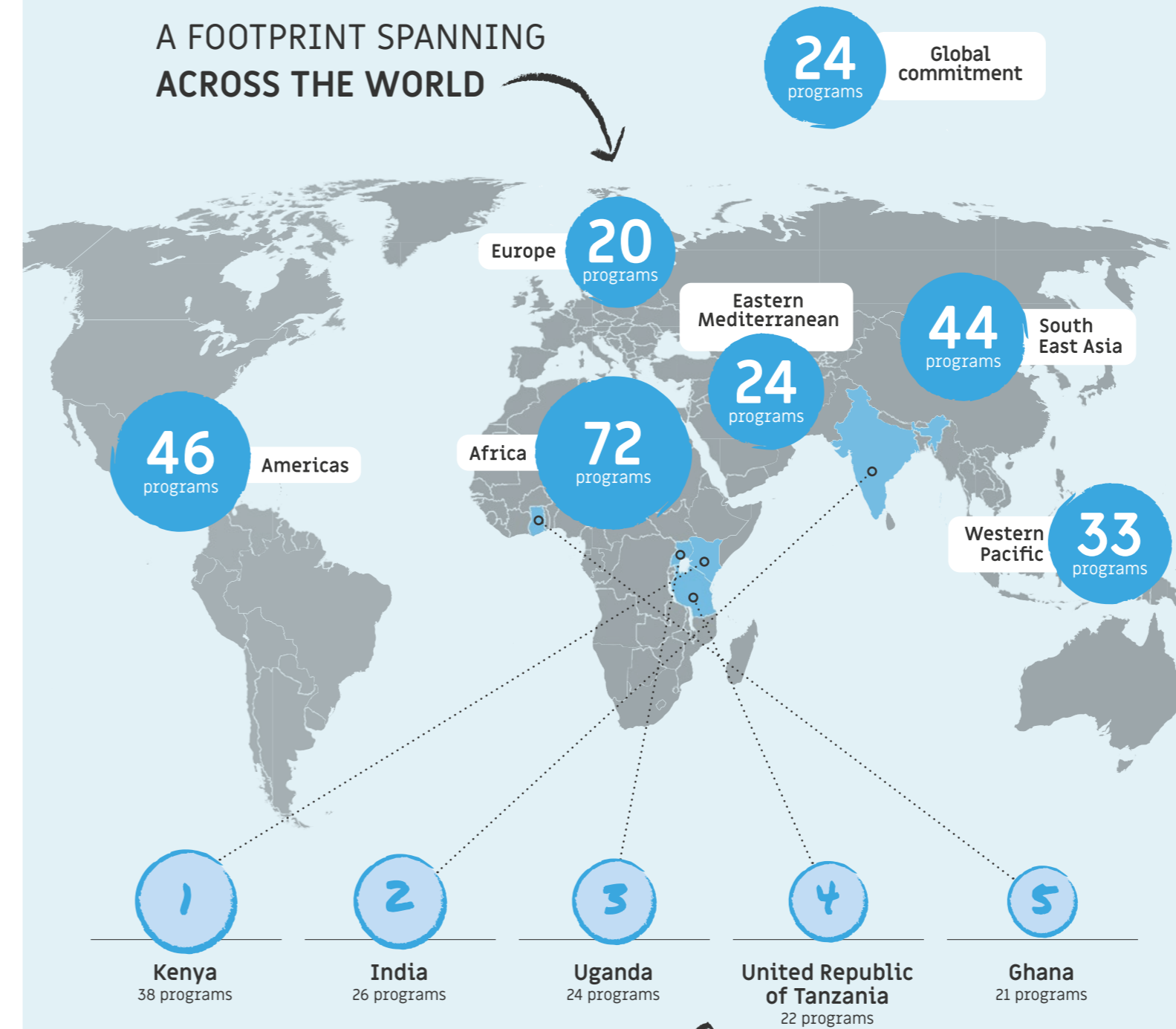
A GLOBAL REACH, WITH A FOCUS ON LMICs



OVER **110**

OF THE 305 COLLABORATIONS FOCUS ON ADDRESSING THE NCD BURDEN IN LOW- AND MIDDLE-INCOME COUNTRIES (LMICs).

A FOOTPRINT SPANNING ACROSS THE WORLD



THE TOP 5 COUNTRIES WE WORK IN ARE...

CONTRIBUTING TO THE SDGs

OUR JOINT EFFORTS ON NCDs HELP US ACHIEVE SDG 3 – HEALTH AND WELL-BEING AND SDG 17 – PARTNERSHIPS, AS WELL AS OTHERS:



28% of our NCDs programs support **SDG 5**



7% of our NCDs programs support **SDG 9**



20% of our NCDs programs support **SDG 10**

ADDRESSING ENVIRONMENT-RELATED SDGs

Environmental risk factors pose a growing threat to the global NCD burden. Innovative pharmaceutical companies are dedicated to addressing environment-related SDGs, including SDG 6 on clean water and sanitation, SDG 12 on responsible production and consumption, and SDG 13 on climate action. Learn more about industry's efforts on climate and health at ifpma.org.

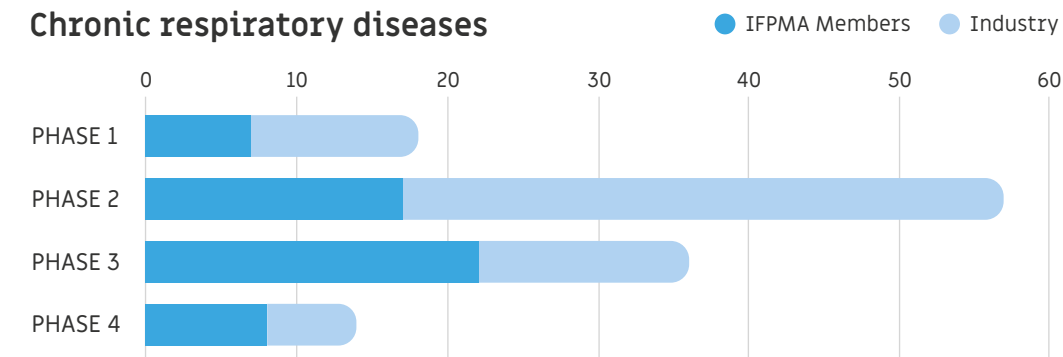
Explore the full range of our collaborations on **Global Health Progress** and see how we are addressing some of the most complex health challenges.

→ globalhealthprogress.org

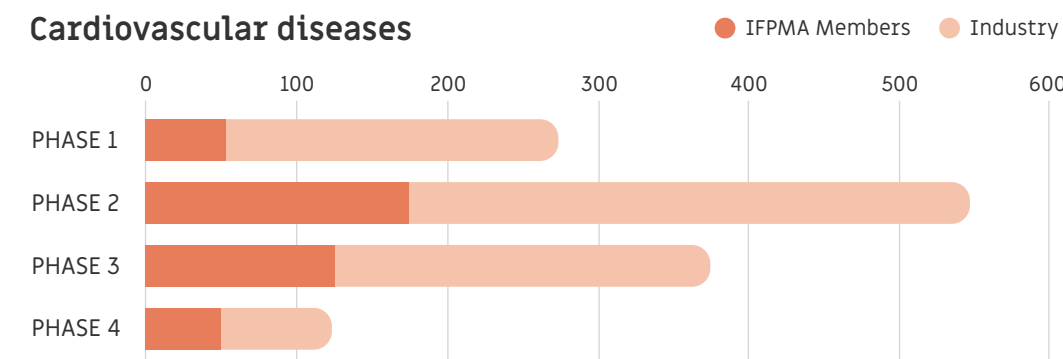
INNOVATING TO IMPROVE LIVES EVERYWHERE

NUMBER OF CLINICAL TRIALS FUNDED BY INDUSTRY BY DISEASE

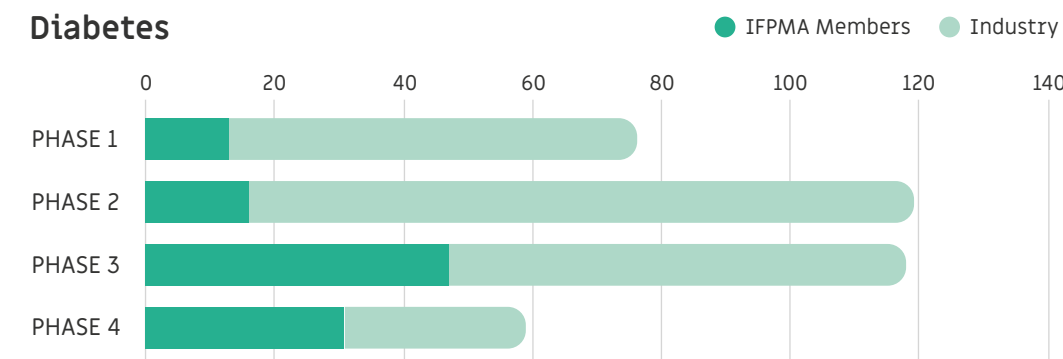
Chronic respiratory diseases



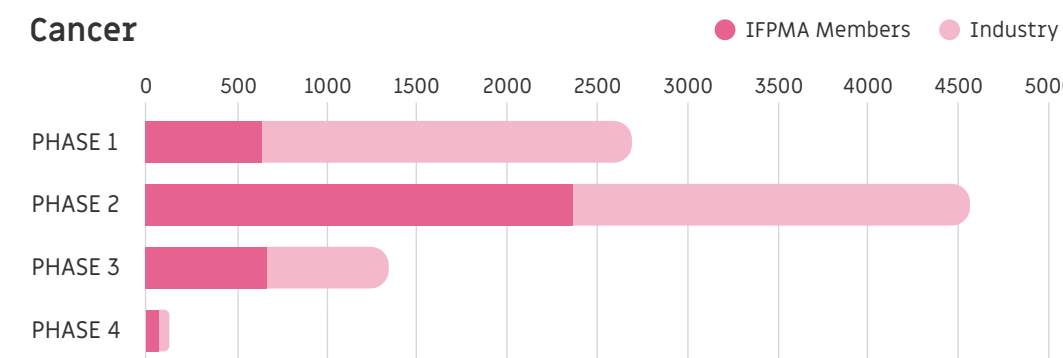
Cardiovascular diseases



Diabetes



Cancer



Source for the above charts:¹³ Inclusion criteria involve 1) recruitment status – clinical trials that are either not yet recruiting, recruiting enrolling by invitation, active but not recruiting and temporarily suspended; 2) study phase – including the clustering of Early Phase 1 and Phase 1; Phase 1/2 and Phase 2; Phase 2/3 and Phase 3; and Phase 4; 3) the Funder type – including IFPMA members through manual selection; and industry members.

THE MOMENT FOR CARING IS NOW

Unless we act collectively to alleviate the burden NCDs pose to societies, economies, and healthcare systems, the prevalence of multi-morbidities in the global population will continue to increase. This is particularly true for people in LMICs, who are disproportionately affected by NCDs (76% of all NCD-related deaths and 86% of NCD-related premature deaths occur in LMICs¹⁰) but also infectious diseases and weak, fragmented, and underfunded health systems.

We urgently need holistic multi-sectoral approaches endorsed through long-term, sustainable funding by governments, global multilateral organizations, and other innovative financing mechanisms that invest in primary healthcare and the integration of essential, comprehensive NCDs services into national UHC health benefit packages. These should also support and strengthen innovative service delivery models, and the participation of communities and people living with NCDs in policymaking and implementation strategies.

The following policy recommendations focus on maximizing our efforts to reduce the NCDs burden, in line with the objective of achieving a 25% reduction in mortality rates of the four major NCDs by 2025, a goal set for the fourth UN High-Level Meeting on NCDs in 2025, and achieving SDG3.4 by 2030.

“The m.Diabetes [m.Ramadan, as part of WHO’s Be He@lthy, Be Mobile initiative] is a winning model, affordable, suitable for developing countries, exportable to other health programs.”

PROF SAÏD NOROU DIOP

Former Medical Director of the National Diabetic Centre, Senegal

FOSTER AN ENABLING ENVIRONMENT FOR INNOVATION AND ACCESS TO THRIVE

The innovative pharmaceutical industry plays a unique role in driving innovation. Medical innovation is not only a foundation of modern healthcare, but a critical element for achieving UHC. Access to safe, effective, quality, and affordable medicines, vaccines, and diagnostics to prevent, manage, or even cure disease fulfils the promise of innovative medical technologies as a key contributor to good health and well-being.

Our industry is committed to playing its part to support access to quality healthcare that contributes to global health progress. That said, a multitude of factors must come into play to ensure that such innovative treatments reach those who need them and that we overcome various barriers to access. We must work constructively with other global health stakeholders to ensure the enabling conditions are in place to support the innovation ecosystem and uptake of necessary treatments.

In the context of NCDs, this means ensuring access to a skilled and appropriately-trained workforce, especially at primary health care level, to screen and diagnose in a timely manner; building clinical trials that reflect the epidemiology and demographics of those who would benefit from the treatment; resilient health systems that integrate NCD treatment and care and are equipped to respond to the growing NCD burden; improved health literacy at population level; robust and fit-for-purpose regulatory frameworks; and sound intellectual property protection.



IMPROVE DATA GENERATION AND ANALYSIS OF THE NCD BURDEN TO LEAVE NO ONE BEHIND

The impact that NCDs have on society in both developed and developing countries is still largely misunderstood because of substantial gaps in data. Better monitoring systems for NCDs are needed to understand changes in modifiable risk factors driving NCDs – including tobacco use, unhealthy diet, physical inactivity, and harmful use of alcohol – and the effectiveness of health promotion and health prevention strategies, including vaccination and early screening.

We also need gender-disaggregated data and more visibility on the compounded impact of NCD

comorbidities, including infectious diseases, as well as quantitative and qualitative evidence to better account for systemic shortcomings and to track the outcomes of NCDs health services.

Understanding the real impact NCDs have on the global population – and the impact inequalities have on closing coverage gaps for NCDs – enables all stakeholders to use their expertise to ensure innovative solutions reach those who need them most. A strong evidence base informs next collective steps to reduce inequalities and improve health outcomes.

Image: reach52 – Cambodia community screening



PUT MULTIPLE, SUSTAINABLE FINANCING MECHANISMS FOR NCDs IN PLACE



People living with NCDs often fall into financial hardship when seeking and receiving NCD treatment and care, whether through productivity losses or in bearing significant out-of-pocket expenses through the lack of sufficient coverage of NCD treatment and care in social insurance schemes.¹¹

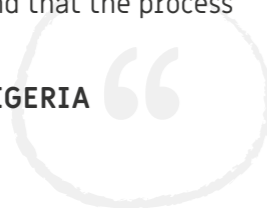
Yet, NCDs remains a disproportionately under-invested area of health, typically receiving between 1-2% of global health funding, with mental health even less.¹² We remain committed to working with others to support governments in reducing the burden of healthcare costs from people living with NCDs by increasing domestic investment and allocating public financing for health, particularly at the primary health care level. This could include exploring sustainable financing approaches to catalyze increased domestic resources for health. We must also work together to accelerate public and private investment in NCD prevention, treatment, and care through initiatives that inform national scale-up and support innovative financing for NCDs.

Financing for NCDs should not be seen as competing with investments for other health agendas, but as a way to bring down silos and strengthen health systems. As the economic case of the WHO NCD Best Buys suggests, investments by national governments in a group of evidence-based policies would translate into economic gains worth USD 230 billion and a return of USD 7 for each dollar invested by 2030. In terms of human lives, it would save close to 7 million people.¹³

“The Cancer Health Fund is a very good initiative because it helps the patients stay longer on treatment. For myself, it is positive. Look at me today, I’m getting back to myself. I’ll really say it’s a good one. I wish more patients could access it and that the process could be easier.”

BENEFICIARY OF THE NIGERIA CANCER HEALTH FUND

Abuja, Nigeria



By leveraging multiple financing sources for NCDs, we can safeguard the continuum of care even during times of health emergencies and ensure the people living with NCDs do not bear the brunt of costs. This can be achieved by:

- Increasing domestic financing and investments for NCDs to enable better population coverage and access to low-cost, first-line treatments and including NCD prevention and care in national UHC benefit packages and national health insurance schemes.
- Prioritizing NCDs within multilateral and financing institution strategies and integrating them into existing global health financing mechanisms (e.g., The World Bank, regional development banks, the Global Fund, the Global Financing Facility, etc.) and healthcare delivery models (e.g., HIV/AIDS, tuberculosis).
- Exploring innovative financing, blended financing, and result-based financing instruments (e.g., advanced market commitments, social impact/health investment bonds, volume guarantees, outcome payments) to provide increased capital for NCDs.

As global dialogue continues on pandemic preparedness, we strongly recommend decision-makers consider the benefits of increased investment in NCDs for achieving UHC and minimizing the human and economic costs of emerging pandemics and other health emergencies. The role of intergovernmental groups such as the G20 may be instrumental in sharing best practices for optimizing health financing and putting in place appropriate and sustainable policies for NCDs and UHC.¹⁴

INTEGRATE NCDs CARE



The prevention and control of NCDs is complex. The etiology and course of these diseases are intrinsically linked with demographic trends – including an ageing population and increase in obesity rates – and are driven by social, commercial, and environmental determinants of health, such as economic inequalities, the marketing of unhealthy products, or the impacts of increasing urbanization and air pollution.

These impinging factors underscore the fact that NCDs cannot be approached in silos. In fact, not only do they require a whole-of-government and whole-of-society approach, but also a whole-of-healthcare approach. The COVID-19 pandemic was a reminder of this, exposing the vulnerability of people living with NCDs due to the harmful nature of infectious diseases and NCDs when suffered as co-morbidities. It made clear the importance of integrating NCD care into routine systems.

Working across global health stakeholders, we must promote awareness, health promotion, prevention, diagnosis, treatment, and care by integrating NCDs management into existing infrastructure and programs. An integrated approach at all levels will help withstand the shocks of health emergencies, future pandemics, global conflicts, and the increasing threat of climate change for health and health systems.¹⁵

ENCOURAGE STRONGER MULTI-SECTORAL COLLABORATIONS



Our industry’s goal is to contribute to people living longer and healthier lives by investing in research and development (R&D), strengthening supply chains and health systems in low-resource areas, increasing community awareness and linking patients to care, delivering preventative health services, building health workforce capacity, and promoting the development, transfer, dissemination, and diffusion of technologies to make medicines and vaccines more accessible and affordable to people everywhere.

We as industry are committed to playing our part, but we need to work together with all stakeholders if we are to move the needle significantly. To this end, the innovative pharmaceutical industry has long been investing in, maintaining, and exploring new ways to engage in multi-sectoral partnerships to improve access to NCD treatment and care in LMICs and beyond.

Governments, health providers, civil society, people living with NCDs, and the private sector all have different expertise that – if shared – can be leveraged to achieve the health-related SDGs, including those focused on UHC and NCDs. If we are to regain progress on global health and development agendas, we must ensure and increase participation of non-state actors in global health and national health decision-making, and foster public-private partnerships that co-create solutions with and for people living with NCDs.

By acting together for NCDs, our efforts could have a far-reaching impact on health and health systems. Our industry is a committed partner in bridging the care gap and we call upon other stakeholders in the global health community to continue working with us to make our shared global goals a reality.



Image: Access Accelerated / PATH – Journey of the Pill

CASE STUDIES

Our industry’s activities to tackle NCDs have been guided by our [Framework for Action on NCDs](#). While the innovative medicines and vaccines we discover and develop are our biggest contribution, we work with hundreds of partners to ensure availability, empower people living with NCDs, and build capacity.



Image: Healthy Heart Africa – Senegal community screening

AVAILABILITY

JOURNEY OF THE PILL

ACTIVE BETWEEN: 2019-2022

The Journey of the Pill is a PATH-led multi-country comprehensive end-to-end NCD supply chain assessment that aims to identify strengths and inefficiencies in the NCD supply chain to ensure a regular, reliable supply of quality, affordable medicines for people living with NCDs.

MEMBER COMPANIES:



STRATEGY:

Supply Chain • Health System Strengthening



SCOPE:

Africa (Ghana, Kenya) • Western Pacific (Vietnam)

AMONG OUR PARTNERS:

- PATH
- Ministries of Health in Kenya, Ghana, and Vietnam
- Kenya Medical Supplies Authority (KEMSA)
- Ghana Health Service (GHS)

PROGRAM OVERVIEW

PATH partnered with Access Accelerated to identify these challenges in NCD supply chains by mapping and assessing health systems (public and private clinics, pharmacies etc.) in three low- and middle-income countries (LMICs) - Kenya, Vietnam, and Ghana. Insights from the assessments, conducted in partnership with the countries’ Ministries of Health, provide a detailed understanding of the product flow to the consumer and an evaluation of the availability of specific drugs, while shedding light into the barriers and challenges that threaten supply security.

RESULTS AND MILESTONES

- Defining the journey of medicines helps inform Ministries of Health and other stakeholders of required actions to strengthen supply chain security for NCDs.
- The roadmaps resulting from the Journey of the Pill assessments led to concrete improvements in NCD supply security.

See [Global Health Progress](#) for the full program overview.

DIABETES CAREPAK

ACTIVE SINCE: 2021

Diabetes CarePak is an innovative and human centred co-packaging solution to improve access and availability of medications and tools that help people manage their diabetic condition in low-resource settings, which will result in improving health outcomes and cost-savings for governments.

MEMBER COMPANIES:



sanofi



STRATEGY:

Community awareness and linkage to care • Health System Strengthening • Health Service delivery – Screening • Health Service delivery – Diagnosis • Health Service delivery – Treatment • Supply chain • Patient safety and medicine quality • Health work force capacity building

SCOPE:

Africa (Kenya, Mali, Mozambique, Tanzania, Uganda) • Western Pacific (Vietnam)

AMONG OUR PARTNERS:

- PATH
- Coalition for Access to NCD Medicines and Products
- Ministries of Health in Kenya and Vietnam
- Helmsley Trust

PROGRAM OVERVIEW

launched by PATH and supported by the Coalition for Access to NCD Medicines and Products, Diabetes CarePak aims to fill the gap in access to diabetes medicines and supplies through innovative and human-centered approaches to ensure access to insulin and other supplies necessary for daily self-management of the disease in LMICs.

The CarePak prototype kit contains one-month's worth of self-management supplies, including a glucometer, test strips, needles/syringes (if applicable), lancets, alcohol swabs, a sharps container, and a “360 view” tool to monitor glucose levels over time. The kit is supplemented with educational materials for people living with diabetes. The project also involved the training of health care workers and the production of trainings and education materials for patients.

RESULTS AND MILESTONES

- The project, piloted in Kenya and Vietnam, has now been expanded to Mali, Mozambique, Tanzania, and Uganda. The project demonstrates improvements and benefits to health systems and preliminary cost savings for governments and other key stakeholders with the aim of increasing uptake and care.

See [Global Health Progress](#) for the full program overview.

NIGERIA CANCER HEALTH FUND

ACTIVE SINCE: 2020

Nigeria's domestic funding for health is limited. The Nigerian Cancer Health Fund (CHF) is working to address this gap by providing funding for chemotherapy and radiation therapy services for people with breast, cervical, and prostate cancers.

MEMBER COMPANIES:



STRATEGY:

Financing • Health service delivery – Treatment

SCOPE:

Africa (Nigeria)

AMONG OUR PARTNERS:

- International Finance Corporation (IFC) – World Bank
- Nigeria Federal Ministry of Health
- GE Healthcare

PROGRAM OVERVIEW

Despite funding reforms that are paving the way toward UHC, health insurance in Nigeria is not yet widespread and does not offer comprehensive cancer care coverage. Access and adherence to cancer care is thereby compromised, with many cancer patients unable to afford the out-of-pocket costs.

In 2020, Roche led a private-sector coalition which, with the support of the World Bank's International Finance Corporation (IFC), the Nigerian Federal Ministry of Health, and others, enabled the creation of the Nigerian CHF. The Fund's goal is to enable standard of care cancer treatment to underprivileged populations regardless of their ability to pay, and to strengthen the national cancer care ecosystem by improving quality of services.

RESULTS AND MILESTONES

- Currently being piloted in six designated public health institutions across the country, the CHF provides access to funding of up to USD4,865 for treatments, chemotherapy, and radiation therapy services for people with breast, cervical, and prostate cancers.
- As a result of the CHF, Nigerians may now spend as little as 20% of their income on cancer treatment and management.

See [Global Health Progress](#) for the full program overview.

EMPOWERMENT OF PEOPLE LIVING WITH NCDs

ACCESS ACCELERATED

ACTIVE SINCE: 2017

Access Accelerated brings together the World Bank and leading private sector life science companies to collectively tackle the growing burden of NCDs in LMICs and support progress toward the SDGs through the co-creation of scalable and sustainable solutions to improve people’s health.

MEMBER COMPANIES:



STRATEGY: Health service delivery • Community awareness and linkage to care • Health system strengthening • Supply chain • Financing • Regulation and legislation

SCOPE: Global commitment

- AMONG OUR PARTNERS:**
- World Bank
 - RTI International
 - Dure Technologies

PROGRAM OVERVIEW

Access Accelerated is a unique cross-industry collaboration that seeks to support multi-sectoral dialogue and drive on-the-ground implementation and action plans toward NCD prevention, treatment, and care in LMICs. The Initiative brings global reach and local expertise in partnership with countries, civil society, multilaterals, NGOs, and local communities. By investing in projects that engage people living with NCDs, Access Accelerated ensures that their experiences, needs, and hopes inform the NCD response. Access Accelerated works to advance joint action in: Generating high-level evidence to make the health and economic case for the prioritization of NCDs in national health policies and their inclusion in UHC agendas; Accelerating public and private investment in NCD prevention, treatment, and care through projects that inform national scale-up and support innovative financing; Optimizing public-private partnership engagement by sharing best practices and learnings and tracking progress through monitoring and evaluation.

RESULTS AND MILESTONES

In 2022, Access Accelerated partners:

- Pursued 54 projects in 37 countries, covering all regions around the world.
- Reached 700 million people, leveraging USD 1.6 billion in health system investment.
- Developed over 200 knowledge products to support the training of 5,644 people.

See [Global Health Progress](#) for the full program overview.

BE HE@LTHY, BE MOBILE

ACTIVE SINCE: 2012

Be He@lthy, Be Mobile works to empower people, communities, and nations through mobile technology, providing access to relevant information and services addressing the prevention and control of NCDs.

MEMBER COMPANIES:



STRATEGY: Community awareness and linkage to care • Health workforce capacity building • Health service delivery – Prevention

SCOPE: Africa (Burkina Faso, Senegal, Zambia) • Americas (Costa Rica) • Eastern Mediterranean (Egypt, Tunisia) • Europe (Norway, UK) • South-East Asia (India) • Western Pacific (Philippines)

- AMONG OUR PARTNERS:**
- World Health Organization (WHO)
 - International Telecommunication Union (ITU)
 - African Development Bank

PROGRAM OVERVIEW

The Be He@lthy, Be Mobile (BHBM) initiative harnesses mobile technology to tackle misinformation, enhance health literacy, and enable communication for the effective prevention and management of NCDs. The approach is deliberately designed to scale mHealth services for NCDs and their risk factors.

BHBM has a free content library of over 1,000 evidence-based health behavior change messages across 11 health topic areas. Instead of promoting specific products, this initiative provides cross-cutting health content and technical support that can be used and incorporated into other services and applications. It works to ensure that the messaging service and content of each mHealth program, including tobacco cessation, diabetes, cervical cancer, and ageing, are integrated with other health services.

RESULTS AND MILESTONES

- In 2015, BHBM successfully met its goal to launch or prepare mHealth programs in all eight target countries.
- In 2018, the BMJ Innovations journal published a series of research studies demonstrating the successful health outcomes and cost-effectiveness of BHBM’s mDiabetes in India and Senegal and mTobaccoCessation in India.
- In 2018, BHBM was awarded the GEC Catalyst Award for Catalyzing Disruptive Innovation.

See [Global Health Progress](#) for the full program overview.

REACH52

ACTIVE SINCE: 2016

Powered by an insight-driven platform and supported by an established network of Community Healthcare Worker Agents, reach52 partners with businesses, governments, and social organizations to deliver targeted, scalable, and data-driven health campaigns across LMICs.

MEMBER COMPANIES:



STRATEGY:

Community awareness and linkage to care • Health System Strengthening • Health Service delivery – Prevention • Health Service delivery – Screening • Health Service delivery – Treatment • Supply chain • Price scheme • Technology/mHealth (software solutions) • Health work force capacity building

SCOPE:

Southeast Asia (Singapore, Philippines, Indonesia, India, Cambodia) • Africa (Kenya, South Africa)

AMONG OUR PARTNERS:

- UNICEF
- Save the Children International
- Unilever

PROGRAM OVERVIEW

With 52% of the world still lacking access to essential health services, reach52 developed an innovative, human-powered, data-driven model of care that uses an offline-first mHealth platform, 'reach52 access', to enable a full range of accessible health services across six countries, with plans to expand its geographical reach.

As part of the program, networks of community health workers (CHW) are upskilled and equipped to become 'reach52 Agents', in partnership with governments and public health providers. In parallel, reach52 partners with private sector, who fund a range of impact-oriented services in hard-to-reach communities. reach52 also collaborates with multilaterals and civil society organizations, leveraging their platform to establish repeatable, scalable health services across LMICs, particularly underserved rural communities.

RESULTS AND MILESTONES

- Since 2021, reach52 has been partnering with Johnson & Johnson to upskill CHWs in the Philippines and Indonesia to become reach52 Agents. To date, 11,925 Agents have been trained, and 312,990 engagements with residents have been facilitated. Following upskilling, 83% of Agents demonstrated improved knowledge on NCDs.
- In 2022, reach52 partnered with Sanofi and Medtronic Labs, providing screening, health education, regular testing, and affordable medicines to residents with hypertension and/or diabetes living in rural Cambodia. Preliminary analysis indicates a 65% reduction in the number of participants with stage-2 hypertension after three months of enrollment.

See [Global Health Progress](#) for the full program overview.

CAPACITY BUILDING

CHANGING DIABETES IN CHILDREN

ACTIVE SINCE: 2009

The Changing Diabetes® in Children partnership was established to bridge the gap in access to type 1 diabetes (T1D) care infrastructure for children by building diagnosis and treatment capacities.

MEMBER COMPANIES:



STRATEGY:

Community awareness and linkage to care • Health system strengthening • Health service delivery – Treatment • Medicine donations

SCOPE:

Africa (14 countries) • Eastern Mediterranean (Sudan, Jordan, Lebanon, Pakistan, Tunisia) • South-East Asia (Bangladesh, India, Indonesia, Myanmar) • Western Pacific (Cambodia, Vietnam) | Americas (Peru)

AMONG OUR PARTNERS:

- World Diabetes Foundation (WDF)
- International Society for Pediatric and Adolescent Diabetes (ISPAD)
- Local NGOs, hospitals, and governments

PROGRAM OVERVIEW

The Changing Diabetes® in Children (CDiC) program is led by a group of local partners in close collaboration with national health systems and aims to bring all elements of necessary diabetes care closer to the children who need it, while building diagnosis and treatment capacities at both the community and country levels. The program has four main components:

- Strengthening healthcare professional capacity with training on T1D diagnosis and treatment.
- Bringing care closer to the people who need it by promoting accessible health facilities.
- Ensuring access to insulin and supplies through donations and supply chain strengthening.
- Ensuring comprehensive patient education through equipment and materials.

RESULTS AND MILESTONES

- In 2022, the program reached more than 6,000 children, refurbished 100 clinics, and introduced insulin pens in eight countries.
- At the launch of its Defeat Diabetes social responsibility strategy in 2019, Novo Nordisk set an ambitious new goal to reach 100,000 vulnerable children and young people living with T1D by 2030.
- A decade-long collaboration between Novo Nordisk and the Diabetic Association of Bangladesh (BADAS) has culminated in the government announcing in September 2023 that it will provide free insulin for vulnerable people with type 1 diabetes.

See [Global Health Progress](#) for the full program overview.

GLOBAL BREAST CANCER INITIATIVE (GBCI) IMPLEMENTATION FRAMEWORK

ACTIVE SINCE: 2023

The GBCI Implementation Framework is an innovative multisectoral partnership model initiated by WHO and City Cancer Challenge Foundation (C/Can) with strong private sector support to mitigate the growing breast cancer burden. The GBCI Framework has the potential to save millions of lives in LMICs and bring about a positive change across the oncology landscape.

MEMBER COMPANIES:



STRATEGY:

Community awareness and linkage to care | Health System Strengthening | Health Service delivery – Prevention | Health Service delivery – Screening | Health Service delivery – Diagnosis | Health Service delivery – Treatment | Financing

SCOPE:

Global commitment

AMONG OUR PARTNERS:

- World Health Organization (WHO)
- City Cancer Challenge Foundation (C/Can)

PROGRAM OVERVIEW

By 2050, two-thirds of the world’s population are expected to live in urban areas, with LMICs driving this growth. To effectively tackle the growing cancer burden, cities must play a fundamental role – meeting people’s needs from the ground up. The C/Can model supports city-led cancer solutions to improve and sustain access to equitable, quality cancer care by enhancing connections between people, policies, and processes to build capacity and resilience, and support the journey to self-reliance.

Starting in 2023, C/Can has partnered with the WHO, the private sector and other stakeholders to support the implementation of the strategic framework of the WHO’s Global Breast Cancer Initiative (GBCI). The collaboration seeks to coordinate and execute multisectoral action at city level, translating the GBCI Framework into actionable work plans to reach its targets. The GBCI leverages the WHO’s global leadership with C/Can’s ‘on-the-ground’ experience, and the industry’s expertise in local networks among major cities around the world, to assess, strengthen, and scale services for the early detection and management of breast cancer. Initial capacity building and technical plans include:

- Training and dissemination of knowledge on the GBCI technical package.
- Capacity building of health workers to prevent treatment abandonment.
- Launch of city-level plans and implementation of the framework to ensure timely diagnostics and management.
- Launch of patient journey optimization plans to reduce treatment abandonment.

RESULTS AND MILESTONES

The GBCI aims to reduce global breast cancer mortality by 2.5% per year by 2040 and avoid 2.5 million global cancer deaths. It aims to achieve this target via three key pillars:

- Promote early detection so that at least 60% of breast cancers are diagnosed at an early stage (I or II)
- Timely diagnosis to ensure that evaluation, imaging, tissue sampling, and pathology reporting is completed within 60 days of presentation
- Comprehensive breast cancer management to deliver the full treatment course to at least 80% of diagnosed patients.

See [Global Health Progress](#) for the full program overview of GBCI Framework Implementation.

HEALTHY HEART AFRICA

ACTIVE SINCE: 2014

Healthy Heart Africa’s public/private partnership model integrates AstraZeneca’s approach to fighting hypertension into existing health platforms in African countries and is committed to reach 10 million people with elevated blood pressure across Africa by 2025.

MEMBER COMPANIES:



STRATEGY:

Community Awareness and linkage to care • Health System Strengthening • Health service delivery – Treatment • Health service delivery – Screening

SCOPE:

Africa (10 countries)

AMONG OUR PARTNERS:

- US President’s Emergency Plan for AIDS Relief (PEPFAR)
- Ministry of Health Kenya
- Population Services International (PSI)

PROGRAM OVERVIEW

Fostering the engagement of local stakeholders, including public, private, and faith-based facilities, the Healthy Heart Africa (HHA) initiative seeks to integrate blood pressure screening and hypertension treatment into existing healthcare service infrastructure and routine care.

In 2016, AstraZeneca and PEPFAR partnered to set up a program integrating HHA’s hypertension services into existing HIV platforms, using hypertension as a stigma-free entry point to find and reach those who need HIV services. With a shared commitment to reaching those outside of the traditional entry points to care, the collaboration leverages PEPFAR’s sizable patient reach and HHA’s access to hard-to-reach populations to bring better care to those in need.

RESULTS AND MILESTONES

Since its inception in 2014, HHA has:

- Activated over 1,300 healthcare facilities in Africa to provide hypertension services and facilitate access to low cost, high-quality branded antihypertensive medicines.
- Trained over 10,600 healthcare workers to provide education and awareness, screening, and treatment services for hypertension.
- Conducted over 38.5 million blood pressure screenings.
- In 2023, the program expanded to 10 new HHA Grant Countries in partnership with African Christian Health Associations Platform (ACHAP) and PATH. These partners will implement and manage the program expansion to five countries each over two years 2023 and 2024.

See [Global Health Progress](#) for the full program overview.

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